Division of Program Compliance – Audits Branch 11401 S. Bloomfield Avenue, Unit 203, 2<sup>nd</sup> Floor Norwalk, CA 90650 (562) 406-3929, FAX (562) 406-3951

April 21, 2009

Mark A. Refowitz, Director Orange County Behavioral Health Services 405 W. 5<sup>th</sup> Street, 7<sup>th</sup> Floor Santa Ana, CA 92701

Dear Mr. Refowitz:

### AUDIT REPORT - ORANGE COUNTY BEHAVIORAL HEALTH SERVICES

We have conducted a desk examination of the Short-Doyle/Medi-Cal Cost Reporting and Data Collection (CR/DC) report of Orange County Behavioral Health Services for the fiscal period July 1, 2003 to June 30, 2004. Our examination was made in accordance with Section 14170 of the Welfare and Institutions Code and was limited to the review of SD/MC units of service/time, Administrative costs and Crossover revenues and contract maximums.

In our opinion, the amount shown in the accompanying Summary of Net Federal Share of Federal Short-Doyle/Medi-Cal Program Costs and State General Fund under EPSDT program (Schedule 1) represents the actual net program costs allowable under the above mentioned statutes.

The effect of this revised allowable program costs is as follows:

### **NET PROGRAM COSTS**

Federal Share of	Settled	Allowed	<u>Adjustment</u>
Short-Doyle/Medi-Cal	\$ 31,400,955	\$ 31,041,452	\$ (359,503)
Federal Share of Healthy Families/Medi-Cal	\$ 34,291	\$ 35,900	\$ 1,609
State General Funds EPSDT Due State	\$ 14,209,513	\$ 14,028,936	\$ (180,577)

If you disagree with any of the results of this audit, you may request an informal appeal conference.

Mark A. Refowitz, Director Orange County Behavioral Health Services April 21, 2009 Page Two

This request must be in writing and received by the Department of Health Care Services within sixty (60) calendar days following the date of receipt of this report. Your notice of disagreement should be directed to John Melton, Acting Chief, Administrative Appeals, Office of Legal Services, Department of Health Care Services, 1029 J Street, Suite 200, Sacramento, California 95814, and be in conformance with provisions of Sections 51016 and sequence, Title 22, of the California Code of Regulations.

Sincerely,

WALTER J HILL JR MBA FA

Chief of Audits

**Enclosures** 

Certified Mail

AC 4/17/09

RAQUEL/RIOS, Supervisor Audits - Southern Region

## COUNTY OF ORANGE BEHAVIORAL HEALTH SERVICES SUMMARY OF NET REIMBURSABLE MEDI-CAL PROGRAM COSTS FISCAL YEAR ENDED JUNE 30, 2004

NET REIMBURSABLE MEDI-CAL PROGRAM COSTS		_	As Settled	. –	Audit Adjustments	As Audited
COUNTY PROVIDERS						
MEDI-CAL - FFP	(Sch. 2a)	\$	16,290,412	\$	(340,149) \$	15,950,263
HEALTHY FAMILIES - FFP	(Sch. 2a)	*	24,726	•	2,523	27,249
TOTAL FFP - COUNTY PROVIDERS	(50771 = 27)	s	16,315,138	· s -	(337,626) \$	15,977,512
		_		· -		,
CONTRACT PROVIDERS						
MEDI-CAL - FFP	(Sch. 3b)	\$	15,110,543	\$	(19,354) \$	15,091,189
HEALTHY FAMILIES - FFP	(Sch. 3b)		9,565		(914)	8,651
TOTAL FFP - CONTRACT PROVIDERS	, ,	s —	15,120,108	`\$ <sup>-</sup>	(20,268) \$	15,099,840
		_		-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
TOTAL FFP - COUNTY PLUS CONTRACT PF	ROVIDERS					
MEDI-CAL - FFP		\$	31,400,955	\$	(359,503) \$	31,041,452
HEALTHY FAMILIES - FFP			34,291		1,609	35,900
TOTAL FFP - COUNTY PLUS CONTRACT	PROVIDERS	\$	31,435,246	\$	(357,894) \$	31,077,352
		=	<del></del> -	=		
SUMMARY OF STATE GENERAL FUNDS						
EPSDT - SGF (See Note below)	(Sch. 4)	\$	14,209,513	\$=	(180,577) \$	14,028,936

Note: The As Settled amount includes a refund of \$33,551 to the State subsequent to the initial EPSDT settlement. (Refer to Adjustment 95).

# COUNTY OF ORANGE BEHAVIORAL HEALTH SERVICES SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE FISCAL YEAR ENDED JUNE 30, 2004

COUNTY OPERATED FEDERAL	COUNTY	OPERATED	FEDERAL.
-------------------------	--------	----------	----------

						Audit	
				As Settled		Adjustments	As Audited
Tot	al Medi-Cal Gross Reimbursement		_				
1.	Inpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	\$	0	\$	0 \$	0
2.	Outpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)		21,276,498		(640,361)	20,636,137
3.	Enhanced SD/MC (Children) - I/P	(MH1968, Ln 16, 16A)		0		0	0
4.	Enhanced SD/MC (Children) - O/P	(MH1968, Ln 16, 16A)		0		72,399	72,399
5.	Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 22)		0		0	0
6.	Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 22)		0		2,262	2,262
7.	Healthy Families Gross Reimbursement-I/P	(MH1968, Ln 27, 27A)		0		0	0
8.	Healthy Families Gross Reimbursement-O/P	(MH1968, Ln 27, 27A)		38,039		(1,139)	36,900
9.	Total		\$_	21,314,537	\$	(566,839) \$	20,747,698
Les	s: Patient & Other Payor Revenues						
10.	Inpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	\$	0	\$	0 \$	0
11.	Outpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)		94,843		(5,208)	89,635
12.	Enhanced SD/MC (Children)-I/P	(MH 1968, Ln 29)		0		0	0
13.	Enhanced SD/MC (Children)-O/P	(MH 1968, Ln 29)		0		0	0
14.	Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 30)		0		0	0
15.	Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 30)		0		0	0
16.	Healthy Families Patient Revenue-I/P	(MH 1968, Ln 31)		0		0	0
17.	Healthy Families Patient Revenue-O/P	(MH 1968, Ln 31)		0		0	0
18.	Total		\$_	94,843	\$	(5,208) \$	89,635
Me	di-Cal Net Reimbursement for Direct Services						
19.	Inpatient SD/MC (Incl Children Enhanced)	(Ln 1,3 - Ln 10,12)	\$	0	\$	0 \$	0
20.	Outpatient SD/MC (Incl Children Enhanced)	(Ln 2,4 - Ln 11,13)		21,181,655		(562,754)	20,618,901
21.	Enhanced SD/MC (Refugees)-I/P	(Ln 5 - Ln 14)		0		0	0
22.	Enhanced SD/MC (Refugees)-O/P	(Ln 6 - Ln 15)		0		2,262	2,262
23.	Healthy Families-I/P	(Ln 7 - Ln 16)		0		0	0
24.	Healthy Families-O/P	(Ln 8 - Ln 17)		38,039	_	(1,139)	36,900
25.	Total		\$	21,219,694	\$_	(561,631) \$	20,658,063
Me	di-Cal MAA Reimbursement						
26.	Service Functions 01-09	(MH1979, Ln 11, Col. A)	\$	776,551	\$	0 \$	776,551
27.	Service Functions 11-19, 31-39	(MH1979, Ln 12, Col. A)		382,215		2	382,217
28.	Service Functions 21-19	(MH1979, Ln 13, Col. A)	_	179,972		2	179,974
29.	Total		\$	1,338,738	\$_	4 \$	1,338,742

# COUNTY OF ORANGE BEHAVIORAL HEALTH SERVICES SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE FISCAL YEAR ENDED JUNE 30, 2004

COUNTY OPERATED FEDERAL			As Settled		Audit Adjustments		As Audited
Amount Negotiated Rates Exceed Cost		-	713 Dettieu	-	riajustments	-	715 71441104
30. Inpatient SD/MC (Incl Children Enhan)	(MH 1968, Ln 38, 38A)	\$	0	\$	0	\$	0
31. Outpatient SD/MC (Incl Children Enhan)	(MH 1968, Ln 38, 38A)	•	0	-	0	•	0
32. Enhanced SD/MC (Refugees)-I/P	(MH1968, Ln 39)		0		0		0
33. Enhanced SD/MC (Refugees)-O/P	(MH1968, Ln 39)		0		0		0
34. Healthy Families-I/P	(MH 1968, Ln 40, 40A)		0		0		0
35. Healthy Families-O/P	(MH 1968, Ln 40, 40A)		0		0		0
36. Total	(14111 1500, Ell 10, 1071)	s ~	0	s -	0	s -	0
						_	
Medi-Cal Administrative Reimbursement							
37. Administrative Reimbursement Limit	(MH 1979, Ln 4)	\$	8,566,964	\$	(94,261)	\$	8,472,703
38. Medi-Cal Administration	(MH 1979, Ln 5)	\$	8,832,379	\$	(77,119)	_	8,755,260
39. Medi-Cal Reimbursement	(Lower of Ln 37, Ln 38)	\$	8,566,964	\$	(94,261)	_	8,472,703
	. ,	=	<del></del> -	=	<del></del>	-	
Healthy Families Administrative Reimbursement							
40. Healthy Families Administrative Reimbursement Limi	t (MH1979, Ln 8)	\$	5,275	\$	(254)	\$	5,021
41. Healthy Families Administration	(MH1979, Ln 9)	\$	0	\$	15,963	\$	15,963
42. Healthy Families Administrative Reimbursement	(Lower of Ln 40, Ln 41)	\$		\$	5,021	\$	5,021
·		=		=	<del></del> -	=	
Utilization Review Reimbursement							
43. Skilled Professional	(MH1979, Ln 14, Col. D)	\$	0	\$	0	\$	0
44. Other Medi-Cal U.R.	(MH1979, Ln 15, Col. D)	\$	0	\$	0	\$	0
		_		=		-	
Net SD/MC Reimbursement - FFP							
45. Direct Services	(MH1979, Ln 16,16A)	\$	11,292,567	\$	(342,341)	\$	10,950,226
46. Enhanced (Children)	(MH1979, Ln 17,17A)		0		47,059		47,059
47. Enhanced (Refugees)	(MH1979, Ln 18)		0		2,262		2,262
48 MAA	(MH 1979, Ln 11, 12 & 13	3)	714,363		2		714,365
49. Administrative Reimbursement	(MH1979, Ln 6)		4,283,482		(47,131)		4,236,351
50. U.R. Skilled Professional	(MH1979, Ln 14)		0		0		0
51. U.R. Other	(MH1979, Ln 15)		0		0		0
52. Negotiated Rate-Payback	(MH1979, Ln 20)	_	0	_	0	_	0
53. Subtotal- FFP		\$_	16,290,412	\$ =	(340,149)	\$ _	15,950,263
54. Contract Limitation Adjustment	(MH 1979, Ln 22)	\$	0	\$	0	\$	0
55. Quality Assurance Review Results	(Adj # )	_	0	_	0	_	0
76 Th. 1000100 p. 1.1		_	16 000 440	_	(2.42.4.42)	•	1.5.0.5.5.5
56. Total SD/MC Reimbursement - FFP		\$ =	16,290,412	\$ =	(340,149)	\$=	15,950,263
Net Healthy Families Reimbursement - FFP							
57. Healthy Families Net Reimbursement	(MH1979, Ln 24,24A)	\$		\$	(741)	\$	23,985
58. Negotiated Rate Exceed Costs	(MH1979, Ln 26)		0		0		0
59. Administrative Reimbursement	(MH1979, Ln 10)		0		3,264		3,264
60. Total Healthy Families Reimbursement - FFP		\$ <u>_</u>	24,726	\$ =	2,523	\$ _	27,249
(1 T . 1 FFD (1 (( ) 1 ( ))		•	16 217 122	•	(225 (22)	æ	15.055.515
61. Total - FFP (Ln 56 + Ln 60)		<sup>\$</sup> =	16,315,138	\$=	(337,626)	<b>5</b> =	15,977,512
							(To Sch. 1)

## COUNTY OF ORANGE BEHAVIORAL HEALTH SERVICES SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST FISCAL YEAR ENDED JUNE 30, 2004

		(1)	(2)	(3)	(4)	(5)	<b>(6)</b>	(7)	(B)	(9)	(10)
		Medi-Cal	Enhanced -	Enhanced -	Total	Healthy	Medi-Cal	Enhanced -	Enhanced -	Total	Healthy
Legal		and Crossover	Children	Refugees	Gross Cost	Families	and Crossover	Children	Refugees	Gross Cost	Families
Entity	Local Entity	Gross Cost	Gross Cost	Gross Cost	(Excl. HFP)	Gross Cost	Gross Cost	Gross Cost	Gross Cost	(Excl. HFP)	Gross Cost
Number	Legal Entity	(MH 1968.	(MH 1968,	(MH 1968,	(Col. 1 to 3)	(MH 1968,	(MH 1968.	(MH 1968.	P A T 1		(MH 1968,
		Ln 5, 5A, 10,10A)	Ln 16, 16A)	(MH 1900, Ln 22)	(COI. 1 to 3)	(MH 1906, Ln 27, 27A)	Ln 5, 5A, 10,10A)	(MH 1906, Ln 16, 16A)	(MH 1966, Ln 22)	(Col. 6 to 8)	(MR 1966, Ln 27, 27A)
		E11 0, 0/1, 10, 10/1)	211 10, 104)	Lii 22)		Lii Zi , Zi Aj	LITO, 3A, 10,10A)	LII 10, 10Aj	CII 22)		Cir Zr, ZrA)
00136	NEW ALTERNATIVES \$	0 \$	0 \$	0 \$	0 \$	0 \$	203,101 \$	0 :	s 0 \$	203,101 \$	0
00203	PACIFIC CLINICS-CHILD & ADULT \$	0 \$	0 \$	0 \$	0 \$	0 \$		139	\$ 0 \$	2,863,341 \$	2,864
00457	SUNNY HILLS CHILDREN'S GARDE \$	0 \$	0 \$	0 \$	0 \$	0 \$		0		7,612 \$	0
	ROYALE HEALTH CARE CENTER \$	0 \$	0 \$	0 \$	0 \$	0 \$		0		1,054,670 \$	0
	CHILD GUIDANCE CENTER \$	0 \$	0 \$	0 \$	0 \$	0 \$		25,667		2,547,835 \$	1,746
00480	WESTERN YOUTH SERVICES \$	0 \$	0 \$	0 \$	0 \$	0 \$		51,720	\$ 0 \$	5,833,724 \$	7,595
	ORANGE CO ASSOCIATION FOR N \$	0 \$	0 \$	0 \$	0 \$	0 \$		0	\$ 0 \$	997,534 \$	0
	OLIVE CREST TREATMENT CENTE \$	0 \$	0 \$	0 \$	0 \$	0 \$		0	\$ 0 \$	2,130,692 \$	0
	ANAHEIM UNION H.S. DISTRICT \$	0 \$	0 \$	0 \$	0 \$	0 \$		0		41,947 \$	0
	LATINO PSYCHOLOGICAL/SOC SV \$	0 \$	0 \$	0 \$	0 \$	0 \$		21,182	\$ 794 \$	1,885,332 \$	0
	KINSHIP CENTER \$	0 \$	0 \$	0 \$	0 \$	0 \$		0		1,324,757 \$	0
	COMMUNITY SERVICE PROGRAMS \$	0 \$	0 \$	0 \$	0 \$	0 \$		0	\$ 0 \$	371,496 \$	0
	CANYON ACRES CHILDREN'S SVC \$	0 \$	0 \$	0 \$	0 \$	0 \$		0		767,519 \$	0
	ASPEN COMMUNITY SVCS / MSO \$	0 \$	0 \$	0 \$	0 \$	0 \$		16,392		3,937,902 \$	1,103
	CRITTENTON SERVICES \$	0 \$	0 \$	0 \$	0 \$	0 \$		0		460,806 \$	0
	SOUTH COAST CHILDRENS SOCIE \$	0 \$	0 \$	0 \$	0 \$	0 \$		0		1,649,320 \$	0
	ASPEN GROUPS, INC. \$	0 \$	0 \$	0 \$	0 \$	0 \$	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0		1,766,132 \$	0
	HILLVIEW ACRES CHILDRENS HO! \$	0 \$	0 \$	0 \$	0 \$	0 \$		0		417,901 \$	0
01207	SHANDIN HILLS REHAB. CENTER \$	0 \$	0 \$	0 \$	0 \$	0 \$		0		41,830 \$	0
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	GRAND TOTAL \$	0 \$~	0 \$	0 \$	0_\$	0 \$	28,187,557 \$	115,100	\$ 794 \$	28,303,451 \$	13,308
	•										

#### COUNTY OF ORANGE BEHAVIORAL HEALTH SERVICES SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST FISCAL YEAR ENDED JUNE 30, 2004

	:	(11)	(12)	(13)	(14)	(15) 	(16)	(17)	(18)	(19) Tabel
11		Total	Healthy	Total	Healthy	Total	Not Coot	Total Net Cost	Net Cost	Total MAA
Legal Entity		Revenue (Excl. HFP)	Families Revenue	Revenue (Excl. HFP)	Families Revenue	Net Cost (Excl. HFP)	Net Cost Healthy Families	(Excl. HFP)	Healthy Families	FFP
Number	Legal Entity	IN PAT		OUTPA			TIENT		ATTENT	Reimbursement
Number	<u>Legal Entity</u>	(MH 1968,	(MH 1968,	(MH 1968,	(MH 1968.	(Col 4-11)	(Col 5-12)	(Col 9-13)	(Col 10-14)	(MH 1979,
		Ln 28 to 30)	Ln 31)	Ln 28 to 30)	Ln 31)	(0014-11)	(001 3-12)	(001 5-15)	(COI 10-14)	Ln 11-13)
	*	2.1. 20 10 00)	2.10.7	211 20 10 00 7	2 0.,					211 11 107
00136	NEW ALTERNATIVES \$	0 \$	0 \$	0 \$	0 \$	0 \$	0 :	\$ 203,101	\$ 0 \$	0
	PACIFIC CLINICS-CHILD & ADULT \$	0 \$	0 \$	13,432 \$	0 \$	0 \$				0
00457	SUNNY HILLS CHILDREN'S GARDE \$	0 \$	0 \$	0 \$	0 \$	0 \$	0	\$ 7,612		0
00478	ROYALE HEALTH CARE CENTER \$	0 \$	0 \$	0 \$	0 \$	0 \$	. 0	\$ 1,054,670		0
00479	CHILD GUIDANCE CENTER \$	0 \$	0 \$	0 \$	0 \$	0 \$	0			0
	WESTERN YOUTH SERVICES \$	0 \$	0 \$	80 \$	0 \$	0 \$	0			0
	ORANGE CO ASSOCIATION FOR N \$	0 \$	0 \$	0 \$	0 \$	0 \$	. 0			0
	OLIVE CREST TREATMENT CENTE \$	0 \$	0 \$	0 \$	0 \$	0 \$				0
	ANAHEIM UNION H.S. DISTRICT \$	0 \$	0 \$	0 \$	0 \$			\$ 41,947		0
	LATINO PSYCHOLOGICAL/SOC SV \$	0 \$	0 \$	1,395 \$	0 \$		0 -			0
	KINSHIP CENTER \$	0 \$	0 \$	12,515 \$	0 \$			\$ 1,312,242		0
	COMMUNITY SERVICE PROGRAMS \$		0 \$	0 \$	0 \$			\$ 371,496		0
	CANYON ACRES CHILDREN'S SVC \$		0 \$	0 \$	0 \$		0			0
	ASPEN COMMUNITY SVCS / MSO \$		0 \$	0 \$	0 \$	• •				0
	CRITTENTON SERVICES \$	0 \$	0 \$	0 \$	0 \$					0
	SOUTH COAST CHILDRENS SOCIE \$	0 \$	0 \$	0 \$	0 \$		-			0
	ASPEN GROUPS, INC. \$	0 \$	0 \$	0 \$	0 \$			\$ 1,766,132		0
	HILLVIEW ACRES CHILDRENS HO! \$		0 \$	0 \$	0 \$		0			Ü
01207	SHANDIN HILLS REHAB. CENTER \$	0 \$	0 \$	0 \$	0 \$			\$ 41,830		U
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v	V <b>J</b>	0 3		Us	0 ,	,		•	<b>.</b> 0 <b>.</b>	U
	GRAND TOTAL \$		s	27,422 \$		<u>-</u>	<u> </u>	\$ 28,276,029	\$ 13,308 \$	
	OLOUID LOIVE 2				<u> </u>	' <del></del> '	<u> </u>	20,210,029	#13,300 #	

#### COUNTY OF ORANGE BEHAVIORAL HEALTH SERVICES SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST FISCAL YEAR ENDED JUNE 30, 2004

Legal Entity <u>Number</u>	Legal Entity [	(MH 1968,	[21]: Neg. Rates Exceed Costs Healthy Families T.I.E.N.T	(22) Neg. Rates Exceed Costs (Excl. HFP) O U I P A (MH 1968,	(MH 1968,	Total SD/MC Reimbursement (FFP) (MH 1979, Line 21)	Healthy Families Reimbursement (FFP) (MH 1979, Ln. 27)	Total Reimbursement (FFP) (Col. 24 + 25)	(27) FFP Contract Maximum	(28)  Lower of FFP or Contract Maximum
00136	NEW ALTERNATIVES \$	Ln 38 to 39)		Ln 38 to 39)	Ln 40, 40A)		0 \$		133,169 \$	108,460
00203 00457	PACIFIC CLINICS-CHILD & ADULT \$ SUNNY HILLS CHILDREN'S GARDE \$	0 \$		0 \$ 0 \$	0 \$ 0 \$		1,862 \$ 0 \$		2,921,795 \$ 21,077 \$	1,522,000 4,031
00478	ROYALE HEALTH CARE CENTER \$	0 9		0 \$	0 \$	562,281 \$	0 \$	562,281 \$	7,274,145 \$	562,281
00479	CHILD GUIDANCE CENTER \$	0 5		0 \$	0 \$		1,135 \$		2,314,382 \$	1,362,438
00480	WESTERN YOUTH SERVICES \$	0 \$		0 \$	0 \$		4,937 \$		5,474,593 \$	3,121,252 530,918
00482 00518	ORANGE CO ASSOCIATION FOR N \$ OLIVE CREST TREATMENT CENTE \$	0 \$		0 <b>\$</b>	0 <b>\$</b>		0 <b>\$</b> 0 <b>\$</b>		1,212,854 <b>\$</b> 1,400,830 <b>\$</b>	1,136,137
00535	ANAHEIM UNION H.S. DISTRICT \$	0 5		0 \$	0 \$		0 \$		32,915 \$	22,321
00542	LATINO PSYCHOLOGICAL/SOC SV \$	0		0 \$	0 \$		0 \$		1,631,278 \$	1,007,097
00596	KINSHIP CENTER \$	0 9		0 \$	0 \$		0 \$		1,010,266 \$	700,308
00654	COMMUNITY SERVICE PROGRAMS \$	0 \$		0 \$	0 \$		0 \$		248,650 \$	198,154
00793	CANYON ACRES CHILDREN'S SVC \$	0 5		0 \$	0 \$		0 \$		554,087 \$	408,908
00801 00870	ASPEN COMMUNITY SVCS / MSO \$ CRITTENTON SERVICES \$	0 5		0 <b>\$</b> 0 <b>\$</b>	0 \$ 0 \$	_,,	717 \$ 0 \$		2,890,129 \$ 424,721 \$	2,101,699 246,422
00916	SOUTH COAST CHILDRENS SOCIE \$	0 :		0 \$	0 \$		0 \$		1,077,954 \$	880,916
00975	ASPEN GROUPS, INC. \$	0 9		0 \$	0 \$		0 \$	,	1,202,941 \$	941,619
01061	HILLVIEW ACRES CHILDRENS HO! \$	0 9	5 0 \$	0 \$	0 \$		0 \$	222,660 \$	301,312 \$	222,660
01207	SHANDIN HILLS REHAB. CENTER \$	0 5	0 \$	0 \$	0 \$	22,219 \$	0 \$	22,219 \$	34,537 \$	22,219
0	0 \$	0 \$		0 \$	0 \$		0 \$		0 \$	0
0	0 \$			0 \$	0 \$		0 \$	0 \$	0 \$	0
0	0 \$ 0 \$			0 \$	0 \$		0 \$		0 \$ 0 \$	0
0	0.5	0 5		0 \$ 0 \$	0 \$ 0 \$		0 \$ 0 \$	0 <b>\$</b> 0 <b>\$</b>	0 \$ 0 \$	0
0	0 \$	0 :	• • •	0 \$	0 3		0.5	0 \$	0 \$	0
ō	0 \$	0 9		0 \$	0 \$		0 \$	0 \$	0 \$	Ö
0	0 \$	. 0	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0 \$	0
0	0 \$	0 5		0 \$	0 \$		0 \$	0 \$	0 \$	0
0	0 \$	0 :		0 \$	0 \$		0 \$		0 \$	0
0	0 \$	0 :		0 \$	0 \$		0 \$		0 \$	0
0	0 \$	0 :	•	0 \$	0 \$				0 \$	0
0	0 <b>\$</b> 0 <b>\$</b>	0 :		0 \$	0 \$	,	0 \$ 0 \$		0 \$	0
0	0 \$			0 <b>\$</b> 0 <b>\$</b>	0 S		0 \$ 0 \$		0 \$ 0 \$	0
0	0 \$		•	0 \$	0 \$				0 \$	0
	GRAND TOTAL \$		ss	0 \$	0 \$	15,091,189 \$	8,651	15,099,840 \$	30,161,635 \$	15,099,840

(To Sch. 1)

## COUNTY OF ORANGE BEHAVIORAL HEALTH SERVICES COMPUTATION OF EPSDT STATE SHARE PER AUDIT FISCAL YEAR ENDED JUNE 30, 2004

		_	As Settled	_A	Audit djustments_	 As Audited
(1)	SD/MC Actuals (MH 1979, Lns. 16, 16A, 17, 17A, 18) (including contractors)	\$	49,520,395	\$	(623,203)	\$ 48,897,192
(2)	Total SD/MC Claims (Adjustments Nos. 85, 87 & 89)	\$	41,203,620	\$	(83,316)	\$ 41,120,304
(3)	Percent % (Line 1/Line 2)		120.18%		-1.27%	118.91%
(4)	EPSDT Claims (Adjustments Nos. 86, 88 & 90)	\$	28,302,900	\$	(83,316)	\$ 28,219,584
(5)	Actual Cost Settled EPSDT SD/MC (Line 3 X Line 4)	\$	34,014,425	\$	(458,518)	\$ 33,555,907
(6)	Cost Settled Baseline for EPSDT	\$	3,515,358	\$	-	\$ 3,515,358
(7)	Net Cost Settlement Amount (Line 5 - Line 6)	\$	30,499,067	\$	(458,518)	\$ 30,040,549
(8)	46.70% of Cost Settlement Amount (Line 7 x 46.70%)	\$	14,243,064	\$	(214,128)	\$ 14,028,936
(8a)	FY 2001-02 EPSDT Settlement	\$	14,696,250	\$	-	\$ 14,696,250
(8b)	Annual Local Growth (L. 8 - 8a)	\$	-	\$	-	\$ -
(9)	County Match 10% of Local Growth (8b x 10%)	\$	-	\$	-	\$ -
(10)	Net Cost Settlement Amount (L. 8 - 9)	\$	14,243,064	\$	(214,128)	\$ 14,028,936
(11)	SGF Distribution (Settled and Audited) (Adjustments Nos. 92 to 94)	\$	14,243,064	\$	(33,551)	\$ 14,209,513
(12)	SGF Due County (State)	\$	<u> </u>	\$	(180,577)	\$ (180,577) (To Sch. 1)
						(10 301. 1)

### Source:

- (1) Total CFRS SD/MC actuals after final Settlement (Col. 1) and Audit (Col. 3) for Net Direct Outpatient Services (includes Mode 05 SF's 20-94, Mode 10, and Mode 15)
- (2) Total SD/MC paid claims (total non-hospital, including PHF's) by County Submitting Claims (inclues contract providers, excludes Healthy Families)
- (4) SD/MC paid claims for children under 21 years of age (full scope, non-hospital, including PHF's) including new aid codes by County of Beneficiary
- (6) Cost Settled Baseline for EPSDT for FY 2003-2004, includes increase for FFS/MC provider rate increase
- (11) SGF gross distribution (See DMH letter dated January 14, 2002 sent to Local Mental Health Directors) Includes adjustment for additional SGF and ASO non participants
- (12) Amount owed back to the state cannot be more than was advanced or settled.

Provide	COUNTY OF	ORAN	GE		Provider Number 00030		No. of Adj. 95		Fiscal Pe		
	Report Refe	erence					As		Increase		As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS		Reported		(Decrease)		Audited
				ADJUSTMENTS TO REPORTED COSTS							
1	MH 1960	6	В	MEDI-CAL ADJUSTMENTS FROM MH 1961		\$	0	\$	(160,056)	\$	(160,056)
				To eliminate Mental Health Interest reported on MH 1962-Othe that were not actually incurred by the County	er Adjustments						
2	MH 1960	8	С	ALLOWABLE COSTS FOR ALLOCATION		\$	92,902,509	\$	(160,056)	\$	92,742,453
				To adjust Allowable Costs for Allocation in conjunction with adnumber 1.	justment						
3	MH 1960	12	С	TOTAL ADMINISTRATIVE COSTS		\$	23,688,955	\$	(160,056)	\$	23,528,899
				To adjust reported Total Administrative Costs in conjunction w number 2.	ith adjustment						
4 5	MH 1960 MH 1960	9	C	SD/MC ADMINISTRATION HEALTHY FAMILIES ADMINISTRATION		\$	8,832,379 0	\$	(77,119) 15,963	\$	8,755,260 15,963
6 Info.	MH 1960 MH 1960	11 12	ı	NON-SD/MC ADMINISTRATION TOTAL ADMINISTRATIVE COSTS		\$ <u></u>	14,856,576 23,688,955	\$ _	(98,900) (160,056)	\$ _	14,757,676 23,528,899
				To adjust SD/MC, Healthy Families and Non-SD/MC Administic conjunction with adjustment number 2. The reallocation of au Administrative Costs was based on the Medi-Cal Administrative (MAA) Average Medi-Cal Eligibility Factor of 37.28% after the administrative costs for Mode 45 and Mode 60 for Service Funwhich was provided by a County operated provider.	idited Total re Activities allocation of						
				* Balance carried forward to subsequent adjustment.  ** Balance brought forward from prior adjustment.							

Provider	r				Provider Number	No. of Adj.	Fiscal Pe	riod Ended
	COUNTY O	ORAN	GE		00030	95	June 3	30, 2004
	Report Ref	erence			·	As	Increase	As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Audited
				ADJUSTMENTS TO ALLOCATION OF COSTS SERVICE FUNCTION CODES COUNTY PROVI				
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 Info.	MH 1966	3333333333333333333	· · · · H I J K L M N O P Q R S T	GROSS COST - FFS 15- GROSS COST - FFS PSYCHIATRIST - PROV. #8095 15- GROSS COST - FFS PSYCHIATRIST - PROV. #8095 15- GROSS COST - FFS PSYCHIATRIST - PROV. #8095 15- GROSS COST - FFS PSYCHIATRIST - PROV. #8095 15- GROSS COST - FFS PSYCHOLOGIST - PROV. #8096 15- GROSS COST - FFS PSYCHOLOGIST - PROV. #8096 15- GROSS COST - FFS PSYCHOLOGIST - PROV. #8096 15- GROSS COST - FFS PSYCHOLOGIST - PROV. #8096 15-	2-SF 30 40 50 60 31 41 51 61 32 42 52 33 43 34 44 35 65 he service	\$ 228,953 \$ 2,513,687 \$ 8,113 \$ 2,127,232 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0	\$ (228,953) \$ (2,513,687) \$ (8,113) \$ (2,127,232) \$ 106,358 \$ 1,572,285 \$ 2,692 \$ 2,125,376 \$ 43,069 \$ 392,343 \$ 5,421 \$ 44,569 \$ 414,910 \$ 15,930 \$ 134,149 \$ 19,027 \$ 1,856 0	\$ 0 \$ 0 \$ 0 \$ 106,358 \$ 1,572,285 \$ 2,692 \$ 2,125,376 \$ 43,069 \$ 392,343 \$ 5,421 \$ 44,569 \$ 414,910 \$ 15,930 \$ 134,149 \$ 19,027 \$ 1,856
				* Balance carried forward to subsequent adjustment.  ** Balance brought forward from prior adjustment.				

Provider	COUNTY OF	- ORANG	=		Provider Number 00030	No. of Adj.		riod Ended 30, 2004
	Report Refe		<u> </u>		1 00030	As	Increase	As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Audited
24 25 26 27 28 29 Info.	MH 1966 MH 1966 MH 1966 MH 1966 MH 1966	3 3 3 3 3 3		ADJUSTMENTS TO ALLOCATION OF COSTS SERVICE FUNCTION CODES CONTRACT PROVIDED SERVICE FUNCTION CONTRACT PROVIDE SERVICE FUNCTION CONTRACT PROVIDED SERVICE FUNCTION CONTRACT PROVIDE	<u>VIDERS</u> 50 58 30 40 31 41	\$ 90,159 \$ 100,837 \$ 1,335,752 \$ 31,672 \$ 1,429,737 \$ 443,007 \$ 3,431,164	\$ (21,585) \$ 21,585 \$ (253,032) \$ 253,032 \$ (177,992) \$ 177,992 \$ 0	\$ 68,574 \$ 122,422 \$ 1,082,720 \$ 284,704 \$ 1,251,745 \$ 620,999 \$ 3,431,164
				** Balance brought forward from prior adjustment.				

Provider					Provider Number	No. of Adj.	Fiscal Per	riod Ended
	COUNTY OF	FORAN	GE		00030	95	June 3	0, 2004
	Report Ref	erence				As	Increase	As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Audited
	23.11		30	ADJUSTMENTS TO REPORTED TOTAL UNITS OF SER	RVICE/TIME			
				Mode	-SE			
30	MH 1966	2	-	TOTAL UNITS - FFS 15-	<del></del> 1	93,135	(93,135)	0
31	MH 1966	2	-	TOTAL UNITS - FFS 15-	40	1,022,535	(1,022,535)	ŏ
32	MH 1966	2	-	TOTAL UNITS - FFS 15-	50	3,300	(3,300)	o l
33	MH 1966	2	-	TOTAL UNITS - FFS 15-	60	865,330	(865,330)	ŏ
34	MH 1966	2	Н	TOTAL UNITS - FFS PSYCHIATRIST - PROV. #8095 15-	31	0	43,265	43,265
35	MH 1966	2	1	TOTAL UNITS - FFS PSYCHIATRIST - PROV. #8095 15-		0	639,585	639,585
36	MH 1966	2	J	TOTAL UNITS - FFS PSYCHIATRIST - PROV. #8095 15-	51	0	1,095	1,095
37	MH 1966	2	K	TOTAL UNITS - FFS PSYCHIATRIST - PROV. #8095 15-		0	864,575	864,575 ·
38	MH 1966	2		TOTAL UNITS - FFS PSYCHOLOGIST - PROV. #8096 15-		0	17,520	17,520
39	MH 1966	2	M	TOTAL UNITS - FFS PSYCHOLOGIST - PROV. #8096 15-		0	159,600	159,600
40	MH 1966	2	N	TOTAL UNITS - FFS PSYCHOLOGIST - PROV. #8096 15-	I	0	2,205	2,205
41	MH 1966	2	0	TOTAL UNITS - FFS MFCC - PROV. #8097 15-		0	18,130	18,130
42 43	MH 1966 MH 1966	2 2	P	TOTAL UNITS - FFS MFCC - PROV. #8097 15-	- 1	0	168,780	168,780
44	MH 1966	2	Q	TOTAL UNITS - FFS LCSW - PROV. #8098 15-		0	6,480	6,480
45	MH 1966	2	R	TOTAL UNITS - FFS LCSW - PROV. #8098 15- TOTAL UNITS - FFS RN - PROV. #8099 15-	j.	0	54,570	54,570
46	MH 1966	2	3   T			0	7,740	7,740
Info.	101111900	2	'	TOTAL UNITS - FFS RN - PROV. #8099 15- TOTAL	00	0		755 
				To adjust the reported Fee-For-Service (MHS) total units of se service function level to identify the total units of service/time be discipline/provider number and by service function code as ref County's supporting documentation.	y individual			
				* Balance carried forward to subsequent adjustment.     ** Balance brought forward from prior adjustment.				

Provide					Provider Number	No. of Adj.		riod Ended
	COUNTY OF		GE		00030	95	June 3	0, 2004
Adi.	Report Refe	erence		EXPLANATION OF AUDIT ADJUSTME	NTS	As Reported	Increase (Decrease)	As Audited
No.	Sch.	Line	Col.					
				ADJUSTMENTS TO REPORTED SD/MC UNITS/ COUNTY PROVIDERS	<u>rime</u>			
47 48 Info.	MH 1966A MH 1966A		1	MEDI-CAL UNITS 07/01/03 - 09/30/03 - COUNTY PROVIDERS MEDI-CAL UNITS 10/01/03 - 06/30/04 - COUNTY PROVIDERS TOTAL MEDI-CAL UNITS	10	2,241,330 6,377,505 8,618,835	21,436 48,208 69,644	2,262,766 * 6,425,713 * 8,688,479
				To adjust reported Medi-Cal units to include Medicare/Medi-Caunits, Enhanced SD/MC (Children) units, Enhanced SD/MC (Figure 2014) and Healthy Families (SED) units per settled cost report. Copi detailing adjustments by service functions have been provided	lefugees) units es of workpapers			
				- Medicare/Medi-Cal Crossover Units 07/01/03 - 09/30/03 - Medicare/Medi-Cal Crossover Units 10/01/03 - 06/30/04 - Enhanced SD/MC (Children) Units 07/01/03 - 09/30/03 - Enhanced SD/MC (Children) Units 10/01/03 - 06/30/04 - Enhanced SD/MC(Refugees) Units 07/01/03 - 06/30/04 - Healthy Families (SED) Units 07/01/03 - 09/30/03 - Healthy Families (SED) Units 10/01/03 - 06/30/04 Subtotal 07/01/03 - 09/30/03 Subtotal 10/01/03 - 06/30/04 Total	19,445 34,274 0 0 0 1,991 13,934 21,436 48,208 69,644			
49 50 Info.	MH 1966A MH 1966A			MEDI-CAL UNITS 07/01/03 - 09/30/03 - COUNTY PROVIDERS MEDI-CAL UNITS 10/01/03 - 06/30/04 - COUNTY PROVIDERS TOTAL MEDI-CAL UNITS  To adjust the as settled total Medi-Cal units to agree with total per the State Department of Mental Health (DMH) Summary o Report dated December 3, 2008. Copies of workpapers detail by service functions have been provided to the County.	f Approved Claims	2,262,766 6,425,713 8,688,479	(152,958) 67,717 (85,241)	2,109,808 6,493,430 8,603,238
				* Balance carried forward to subsequent adjustment.  ** Balance brought forward from prior adjustment.	_			

Provide	COUNTY OF				Provider Number	No. of Adj.		iod Ended
			<u> </u>		00030	95	June 3	0, 2004
Adj.	Report Ref	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	As Reported	Increase (Decrease)	As Audited
				ADJUSTMENTS TO REPORTED SD/MC UNITS/TIME - COUN	NTY PROVIDERS			
51 Info. Info.	MH 1966A MH 1966A		1	MEDI-CAL UNITS 07/01/03 - 09/30/03 - COUNTY PROVIDERS MEDI-CAL UNITS 10/01/03 - 06/30/04 - COUNTY PROVIDERS TOTAL MEDI-CAL UNITS	**	2,109,808 6,493,430 8,603,238	154,315 0 154,315	2,264,123 * 6,493,430 * 8,757,553
				To adjust total Medi-Cal units per State DMH Summary of App Report dated December 3, 2008 to agree with total Medi-Cal u County's records. Copies of workpapers detailing adjustments functions have been provided to the County.	inits per the			
52 Info. Info.	MH 1966A MH 1966A			MEDI-CAL UNITS 07/01/03 - 09/30/03 - COUNTY PROVIDERS MEDI-CAL UNITS 10/01/03 - 06/30/04 - COUNTY PROVIDERS TOTAL MEDI-CAL UNITS	**	2,264,123 6,493,430 8,757,553	(154,675) 0 (154,675)	2,109,448 * 6,493,430 * 8,602,878
				To adjust the County's records to incorporate the controls of the State of DMH Summary of Approved Claims Report dated Decor County's records. Copies of workpapers detailing adjustme functions have been provided to the County.	cember 3, 2008			
53 54 Info.	MH 1966A MH 1966A			MEDI-CAL UNITS 07/01/03 - 09/30/03 - COUNTY PROVIDERS MEDI-CAL UNITS 10/01/03 - 06/30/04 - COUNTY PROVIDERS TOTAL MEDI-CAL UNITS	**	2,109,448 6,493,430 8,602,878	(23,294) (123,837) (147,131)	2,086,154 * 6,369,593 * 8,455,747
				To adjust the County's records to incorporate the following Me adjustments. Copies of workpapers detailing adjustments by shave been provided to the County.				
				DMH Disallowed Claims Disallowed EPSDT per DMH Medi-Cal Oversight Audit Claimed IMD Units County Manual Credits County Compliance Issue #05-027 Total	(45,471) (695) (67,046) (29,204) (4,715)			
				* Balance carried forward to subsequent adjustment.  ** Balance brought forward from prior adjustment.	(147,131)			

Provide					Provider Number	No. of Adj.	Fiscal Per	iod Ended
	COUNTY OF	ORAN	GE		00030	95	June 3	0, 2004
	Report Refe	erence				As	Increase	As
Adj.	Form/ Sch.	Line	0-1	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Audited
No.	Sch,	_ Line_	Col.					
İ				ADJUSTMENTS TO REPORTED SD/MC UNITS/TIME - COUI	NTY PROVIDERS			
Info. 55 Info.	MH 1966A MH 1966A			MEDI-CAL UNITS 07/01/03 - 09/30/03 - COUNTY PROVIDERS MEDI-CAL UNITS 10/01/03 - 06/30/04 - COUNTY PROVIDERS TOTAL MEDI-CAL UNITS	**	2,086,154 6,369,593 8,455,747	0 (18) (18)	2,086,154 * 6,369,575 * 8,455,729
				To reduce total Medi-Cal units of service/time for county opera Medi-Cal units of service/time exceed total units. Medi-Cal units cannot exceed total units. Copies of workpapers detailing adjustions have been provided to the County.	ts of service/time			
56 57 Info.	MH 1966A MH 1966A			MEDI-CAL UNITS 07/01/03 - 09/30/03 - COUNTY PROVIDERS MEDI-CAL UNITS 10/01/03 - 06/30/04 - COUNTY PROVIDERS TOTAL MEDI-CAL UNITS	**	2,086,154 6,369,575 8,455,729	(24,918) (73,130) (98,048)	2,061,236 6,296,445 8,357,681
				To reduce total Medi-Cal units for county operated providers b Medicare/Crossover units, audited Enhanced SD/MC (Childre audited Enhanced SD/MC (Refugees) units and audited Healt (SED) units per State DMH Summary of Net Approved Claims December 3, 2008. Copies of workpapers detailing adjustmer functions have been provided to the County.	n) units, hy Families Report dated			
				- Medicare/Medi-Cal Crossover Units 07/01/03 - 09/30/03 - Medicare/Medi-Cal Crossover Units 10/01/03 - 06/30/04 - Enhanced SD/MC (Children) Units 07/01/03 - 09/30/03 - Enhanced SD/MC (Children) Units 10/01/03 - 06/30/04 - Enhanced SD/MC(Refugees) Units 07/01/03 - 06/30/04 - Healthy Families (SED) Units 07/01/03 - 09/30/03 - Healthy Families (SED) Units 10/01/03 - 06/30/04 Subtotal 07/01/03 - 09/30/03 Subtotal 10/01/03 - 06/30/04 Total	(18,856) (34,223) (4,548) (24,053) (920) (1,514) (13,934) (24,918) (73,130) (98,048)			
				Balance carried forward to subsequent adjustment.     Balance brought forward from prior adjustment.				

Provide	r COUNTY OF				Provider Number	No. of Adj.	Fiscal Peri	
<del></del>					00030	95	June 30	J, 2004 
Adj.	Report Refe	erence	1	EXPLANATION OF AUDIT ADJUSTME	ENTS	As Reported	Increase (Decrease)	As Audited
No.	Sch.	Line	Col.					
				ADJUSTMENTS TO REPORTED TOTAL UNITS OF SE CONTRACT PROVIDERS	RVICE/TIME			
58 59 60 61 62 63 64 65 66 67 68 69 Info.	MH 1966 MH 1966	2 2 2 2 2 2 2 2 2 2 2 2 2		TOTAL UNITS - NEW ALTERNATIVE - LE #00136 TOTAL UNITS - NEW ALTERNATIVE - LE #00136 TOTAL UNITS - WESTERN YOUTH SVCS - LE #00480 TOTAL UNITS - WESTERN YOUTH SVCS - LE #00480 TOTAL UNITS - WESTERN YOUTH SVCS - LE #00482 TOTAL UNITS - ORANGE CO ASSOC. FOR M.H LE #00482 TOTAL UNITS - ORANGE CO ASSOC. FOR M.H LE #00482 TOTAL UNITS - LATINO PSYCHOLOGICAL/SOC SVCS - LE #00 TOTAL UNITS - LATINO PSYCHOLOGICAL/SOC SVCS - LE #00 TOTAL UNITS - ASPEN COMM. SVCS / MSO - LE #00801 TOTAL UNITS - ASPEN COMM. SVCS / MSO - LE #00801 TOTAL UNITS - ASPEN COMM. SVCS / MSO - LE #00801 TOTAL UNITS - ASPEN COMM. SVCS / MSO - LE #00801 TOTAL UNITS - ASPEN COMM. SVCS / MSO - LE #00801 TO reclassify contract providers total units of service/time to re units of service/time. Total units of service/time were incorrect the original cost report and the Department of Mental Health's allow any changes to the total units of service/time during rec	15-40 15-10 15-30 15-50 15-58 eflect true total ctly inputted onto	22,747 128,646 55,390 61,950 632,466 17,466 671,797 257,188 268,355 449,172 51,553 5,241	14,597 (14,597) (13,261) 13,261 (119,807) 119,807 (83,635) 83,635 44,508 (44,508) (871) 871	37,344 114,049 42,129 75,211 512,659 137,273 588,162 340,823 312,863 404,664 50,682 6,112
70 71 Info.	MH 1966A MH 1966A			ADJUSTMENTS TO REPORTED SD/MC UNITS/CONTRACT PROVIDERS  MEDI-CAL UNITS 07/01/03 - 09/30/03 - CONTRACT PROVIDER  MEDI-CAL UNITS 10/01/03 - 06/30/04 - CONTRACT PROVIDER  TOTAL MEDI-CAL UNITS  To adjust the as settled total Medi-Cal units to agree with total per the State Department of Mental Health (DMH) Summary or report dated December 3, 2008. Copies of workpapers detail by service functions have been provided to the County. (A sereport will not be issued to the contract providers.)	RS RS I Medi-Cal units of Approved Claims ling adjustments	3,873,675 11,068,737 14,942,412	6,875 254,001 260,876	3,880,550 11,322,738 15,203,288
				* Balance carried forward to subsequent adjustment.     ** Balance brought forward from prior adjustment.				

rovide	r			<del></del>	Provider Number	No. of Adj.	Fiscal Peri	od Ended
	COUNTY OF	ORAN	GE		00030	95	June 30, 2004	
	Report Refe	erence			-	As	Increase	As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported	(Decrease)	Audited
				ADJUSTMENTS TO REPORTED SD/MC UNITS/I CONTRACT PROVIDERS	IME -			
Info. Info. Info.	MH 1966A MH 1966A			MEDI-CAL UNITS 07/01/03 - 09/30/03 - CONTRACT PROVIDER MEDI-CAL UNITS 10/01/03 - 06/30/04 - CONTRACT PROVIDER TOTAL MEDI-CAL UNITS		3,880,550 11,322,738 15,203,288	0 0	3,880,550 11,322,738 15,203,288
				To adjust total Medi-Cal units per State DMH Summary of App Report dated December 3, 2008 to agree with total Medi-Cal of County's records. State DMH Approved Claims Report agree records. Copies of workpapers detailing adjustments by servitable been provided to the County. (A separate audit report work to the contract providers.)	units per the s with the County ce functions			
72 73 Info.	MH 1966A MH 1966A			MEDI-CAL UNITS 07/01/03 - 09/30/03 - CONTRACT PROVIDER MEDI-CAL UNITS 10/01/03 - 06/30/04 - CONTRACT PROVIDER TOTAL MEDI-CAL UNITS		3,880,550 11,322,738 15,203,288	(6,538) (272,765) (279,303)	3,874,012 11,049,973 14,923,985
				To adjust the County's records to incorporate the following Me adjustments. Copies of workpapers detailing adjustments by have been provided to the County. (A separate audit report w to the contract providers.)	service functions			
				DMH Disallowed Claims Disallowed EPSDT per DMH Medi-Cal Oversight Audit Claimed IMD Units County Manual Credits Compliance Issue #07-033 - LE 00975 College Community Total	(152,271) (46,699) 0 (79,707) y (626) (279,303)			
				* Balance carried forward to subsequent adjustment.  ** Balance brought forward from prior adjustment.				

Provide	COUNTY OF	OBAN	<u> </u>		Provider Number	No. of Adj.		iod Ended
	Report Refe				00030	95	June 3	0, 2004
Adj. No.	Form/	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	As Reported	Increase (Decrease)	As Audited
	Scri.	Line_	Coi.	ADJUSTMENTS TO REPORTED SD/MC UNITS/T CONTRACT PROVIDERS	IME -			
74 75 Info.	MH 1966A MH 1966A		TOTAL TOTAL	MEDI-CAL UNITS 07/01/03 - 09/30/03 - CONTRACT PROVIDER MEDI-CAL UNITS 10/01/03 - 06/30/04 - CONTRACT PROVIDER TOTAL MEDI-CAL UNITS  To reduce total Medi-Cal units of service/time for contract provunits of service/time exceed total units. Medi-Cal units of service/time exceed total units. Copies of workpapers detailing adjustment	viders as Medi-Cal	3,874,012 11,049,973 14,923,985	(7,349) (12,306) (19,655)	3,866,663 * 11,037,667 * 14,904,330
76 77	MH 1966A MH 1966A			functions have been provided to the County. (A separate aud be issued to the contract providers.)  MEDI-CAL UNITS 07/01/03 - 09/30/03 - CONTRACT PROVIDER  MEDI-CAL UNITS 10/01/03 - 06/30/04 - CONTRACT PROVIDER	it report will not	3,866,663 11,037,667	(66,983) (60,705)	3,799,680 10,976,962
Info.				TOTAL MEDI-CAL UNITS  To reduce total Medi-Cal units for contract providers by audite Crossover units, audited Enhanced SD/MC (Children) units, a Enhanced SD/MC (Refugees) units and audited Healthy Fami per State DMH Summary Net Approved Claims Report dated Copies of workpapers detailing adjustments by service function provided to the County. (A separate audit report will not be issuentract providers.)	udited lies (SED) units December 3, 2008. Ins have been	14,904,330	(127,688)	14,776,642
				- Medicare/Medi-Cal Crosssover Units 07/01/03 - 09/30/03 - Medicare/Medi-Cal Crosssover Units 10/01/03 - 06/30/04 - Enhanced SD/MC (Children) Units 07/01/03 - 09/30/03 - Enhanced SD/MC (Children) Units 10/01/03 - 06/30/04 - Enhanced SD/MC (Refugees) Units 07/01/03 - 06/30/04 - Healthy Families (SED) Units 07/01/03 - 09/30/03 - Healthy Families (SED) Units 10/01/03 - 06/30/04 Subtotal 07/01/03 - 09/30/03 Subtotal 10/01/03 - 06/30/04 Total	(51,641) (1,298) (14,048) (52,556) (405) (1,294) (6,446) (66,983) (60,705) (127,688)			
				* Balance carried forward to subsequent adjustment.  ** Balance brought forward from prior adjustment.				

Provider	COUNTY OF	ORAN	 GE		Provider Number 00030	No. of Adj. 95		eriod Ended 30, 2004
	Report Refe	erence			J	As	Increase	As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	ENTS	Reported	(Decrease)	Audited
78 79 Info.	MH 1968 MH 1968	28 28A	K K	ADJUSTMENTS TO PATIENT AND OTHER PAYOR REVEN  SD/MC + CROSSOVER REVENUE - 07/01/03 - 09/30/03  SD/MC + CROSSOVER REVENUE - 10/01/03 - 06/30/04  TOTAL  To eliminate Medicare revenue received on behalf of Medicare		\$ 43,193 51,650 \$ 94,843	\$ (1,303) (3,905) \$ (5,208)	\$ 41,890 47,745 \$ 89,635
80 81 Info.	MH 1979 MH 1979	23 27	J	ADJUSTED TOTAL SD/MC REIMBURSEMENT (FFP) TOTAL HEALTHY FAMILIES REIMBURSEMENT (FFP) TOTAL  To adjust the Total SD/MC (FFP) and the Total Healthy Familia adjustments to costs, revenues, and units of service/time.		\$ 16,290,412 24,726 \$ 16,315,138	\$ (340,150) 2,523 \$ (337,627)	\$ 15,950,262 27,249 \$ 15,977,511
				* Balance carried forward to subsequent adjustment.     ** Balance brought forward from prior adjustment.				

Provider	COUNTY OF	ORAN	GE		Provider Number 00030	No. of Adj. 95		riod Ended 30, 2004
A !:	Report Refe	erence		EVEL ANATION OF AUDIT AD HIGHME	NTO	As Reported	Increase (Decrease)	As Audited
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	N15	Reported	(Decrease)	Audited
	]			ADJUSTMENTS TO REPORTED SD/MC SETTLES  CONTRACT PROVIDERS	<u>MENT</u>			
82 83 Info.	MH 1979 MH 1979	23 27		ADJUSTED TOTAL SD/MC REIMBURSEMENT (FFP) TOTAL HEALTHY FAMILIES REIMBURSEMENT (FFP) TOTAL		\$ 15,110,543 9,565 \$ 15,120,108	\$ (19,354)	\$ 15,091,189 <u>8,651</u> \$ 15,099,840
				To adjust contract providers Total SD/MC (FFP) and the Total (FFP) due to adjustments to costs, revenues, and units of serv (A separate audit report will not be issued to the contract provi	ice/time.			
				LE #00136 New Alternatives LE #00203 Pacific Clinics LE #00457 Sunny Hills Children's Garden LE #00478 Royale Health Care Center LE #00479 Child Guidance Center LE #00480 Western Youth Services LE #00482 Orange County Assocation for Mental Health LE #00518 Olive Creat Treatment Center LE #00535 Anaheim Union High School District LE #00542 Latino Psychological/Social Services LE #00596 Kinship Center LE #00654 Community Service Programs LE #00793 Canyon Acres Children's Services LE #00801 Aspen Community Services / MSO LE #00870 Crittenton Services LE #00916 South Coast Childrens Society LE #00975 Aspen Groups, Inc LE #01061 Hillview Acres Childrens Home LE #01207 Shandin Hills Rehabilitation Center Total		\$ 108,559 1,521,985 4,031 562,281 1,359,624 3,147,323 530,875 1,136,138 22,321 1,004,136 700,308 198,161 408,910 2,100,637 246,407 880,938 942,591 222,664 22,219 \$ 15,120,108	\$ (99) 15 0 0 2,814 (26,071) 43 (1) 0 2,961 0 (7) (2) 1,062 15 (22) (972) (4) 0 \$ (20,268)	\$ 108,460 1,522,000 4,031 562,281 1,362,438 3,121,252 530,918 1,136,137 22,321 1,007,097 700,308 198,154 408,908 2,101,699 246,422 880,916 941,619 222,660 22,219 \$ 15,099,840
				* Balance carried forward to subsequent adjustment.     ** Balance brought forward from prior adjustment.				

Provider					Provider Number	T	No. of Adj.	1	Fiscal Pe	eriod i	Ended
	COUNTY OF	FORAN	GE		00030		95		June	30, 2	004
	Report Ref	erence					As		Increase		As
Adj. No.	Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	Reported		(Decrease)			Audited
				ADJUSTMENTS TO AS SETTLED EPSDT STATE GENE	RAL FUNDS						
84	SCH.4	1	3	TOTAL SD/MC ACTUALS		\$	49,520,395	\$	(623,203)	\$	48,897,192
				To adjust the SD/MC actuals as a result of adjustments to tota Medi-Cal Costs as reflected in MH1979 for both the County Pr its contract providers. The amount utilized for this purpose wa Enhanced for Outpatient services only.	ogram and						
85 86	SCH 4 SCH 4	2 4	3 3	TOTAL SD/MC CLAIMS EPSDT CLAIMS		\$	41,203,620 28,302,900	\$ \$	(208,334) (208,334)	\$ \$	40,995,286 28,094,566
				To adjust total SD/MC claims and EPSDT claims to include the Department's audit of the EPSDT Program conducted by the S of Mental Health as reflected in the report dated March 3, 2004 covered the period from April 1, 2004 through June 30, 2004. The original recoupment.	State Department 8. This report						
87 88	SCH 4 SCH 4	2 4	3 3	TOTAL SD/MC CLAIMS EPSDT CLAIMS	*	1 ·	40,995,286 28,094,566	\$	208,334 208,334	\$	41,203,620 28,302,900
				To adjust total SD/MC claims and EPSDT claims to reverse th recoupment included in adjustments 85 and 86 above. The refindings affecting "Total SD/MC Claims and EPSDT Claims" win adjustments 89 and 90 below.	vised						
89 90	SCH 4 SCH 4	2 4	3 3	TOTAL SD/MC CLAIMS EPSDT CLAIMS	*	* \$ * \$	41,203,620 28,302,900	\$ \$	(83,316) (83,316)	\$	41,120,304 28,219,584
				To adjust total SD/MC claims and EPSDT claims to include the Department's revised audit of the EPSDT Program conducted Department of Mental Health as reflected in the report dated Mathematical This report covered the period from April 1, 2004 through June This represents the revised recoupment.	by the State March 3, 2008.						
·				* Balance carried forward to subsequent adjustment.     ** Balance brought forward from prior adjustment.							

Provider					Provider Number	No. of Adj.		eriod Ended
	COUNTYO		GE 	, <u> </u>	00030	95	June 3	30, 2004
Adj. No.	Report Ref Form/ Sch.	Line	Col.	EXPLANATION OF AUDIT ADJUSTME	NTS	As Reported	Increase (Decrease)	As Audited
140.	3011.	LIIIe	Coi.	ADJUSTMENTS TO AS SETTLED EPSDT STATE GENER	DAI FIINDS			
					<u>VAL I UNDO</u>		<u>)</u>	
91	SCH 4	10	3	NET COST SETTLEMENT AMOUNT		\$ 14,243,064	\$ (214,128)	\$ 14,028,936
				To adjust net cost settlement amount as a result of adjustments actuals (Total Computable Medi-Cal), total SD/MC Claims and				
92	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION		\$ 14,243,064	\$ (83,896)	\$ 14,159,168 *
				To adjust State General Fund Distribution to include the results Department's audit of the EPSDT Program conducted by the St Department of Mental Health as reflected in the report dated M This report covered the period from April 1, 2004 to June 30, 20 This represents the original SGF recoupment.	tate arch 3, 2008.			
93	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION  To adjust State General Fund Distribution to reverse the original recoupment included in adjustment 92 above. The revised find "State General Fund Distribution" will be taken in adjustment	lings affecting	\$ 14,159,168	\$ 83,896	\$ 14,243,064
94	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION	**	\$ 14,243,064	\$ (33,551)	\$ 14,209,513
				To adjust the State General Fund Distribution to reflect the rest revised EPSDT findings included in the final report dated March				
95	SCH 4	12	3	STATE GENERAL FUND DUE STATE		\$ 0	\$ (180,577)	\$ (180,577)
				To adjust the State General Funds due State as a result of adju Cost Settlement Amount and State General Fund Distribution a				
				Audited Net Cost Settlement Amount Adj 91 Audited State General Fund Distribution Adj 94	\$ 14,028,936 14,209,513 \$ (180,577)			
				* Balance carried forward to subsequent adjustment.     ** Balance brought forward from prior adjustment.	<del></del>			

## CALCULATION OF PROGRAM COSTS MH 1960 (08/04)

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY

	Legal Entity: COUNTY OF ORANGE	A	В	С
Leg	gal Entity Number: 00030	Salaries		Total
		and Benefits	Other	Costs
1	Mental Health Expenditures	63,117,033	130,166,141	193,283,174
2	Encumbrances			
3	Less: Payments to Contract Providers (County Only)		(69,132,802)	(69,132,802)
4	Other Adjustments from MH 1962	(9,140,763)	(22,107,099)	(31,247,862)
5	Total Costs Before Medi-Cal Adjustments	53,976,270	38,926,240	92,902,510
6	Medi-Cal Adjustments from MH 1961		(160,056)	(160,056)
7	Managed Care Consolidation (County Only)			
8	Allowable Costs for Allocation			92,742,453
	Administrative Costs (County Only)			
9	SD/MC Administration			8,755,260
10	Healthy Families Administration			15,963
11	Non-SD/MC Administration			14,757,676
12	Total Administrative Costs			23,528,899
<u></u>	Utilization Review Costs (County Only)			
13	Skilled Professional Medical Personnel			
14	Other SD/MC Utilization Review			
15	Non-SD/MC Utilization Review			
16	Total Utilization Review Costs			
<u></u>				
17	Research and Evaluation (County Only)			472,970
L_				
18	Mode Costs (Direct Service and MAA)			68,740,584
<u></u>				
19	Total Costs - Lines 9 through 18			92,742,453

## CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY MEDI-CAL ADJUSTMENTS TO COSTS MH 1961 (08/04)

### **DEPARTMENT OF MENTAL HEALTH**

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY

Legal Entity: COUNTY OF ORANGE	Α	В	С
Legal Entity Number: 00030	Salaries		Total
	and Benefits	Other_	Adjustments
1 TO ELIMINATE MENTAL HEALTH INTEREST			
2 REPORTED ON MH 1962		(160,056)	(160,056)
3			
4_			
5			
6			
[7			
8			
9			
[10]			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20 Total Adjustments		(160,056)	(160,056)

### CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY OTHER ADJUSTMENTS MH 1962 (08/04)

### DEPARTMENT OF MENTAL HEALTH

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY

	Legal Entity: COUNTY OF ORANGE	A	В	C
Le	gal Entity Number: 00030	Salaries		Total
		and Benefits	Other	Adjustments _
1	DRUG ABUSE PROGRAM	(14,418,350)	(24,577,326)	(38,995,676)
2	DAMHS	(2,295,494)	(3,028,216)	(5,323,710)
3	ADMIN COSTS	(10,630,771)	(10,873,110)	(21,503,881)
4	STATE HOSPITAL EXPENDITURES		(4,238,236)	(4,238,236)
5	DUAL DIAGNOSIS PROGRAM COSTS	2,617,769	1,683,531	4,301,300
6	MENTAL HEALTH CWCAP		1,805,100	1,805,100
7	MENTAL HEALTH INTEREST		160,056	160,056
8_	ADMIN ALLOCATION	15,586,108	8,895,034	24,481,142
9_	OTHER MH CONTRACT		(8,773,751)	(8,773,751)
10	ETS CONTRACT		944,808	944,808
11	FFS - PACIFICARE BEHAVIORAL HEALTH		4,877,985	4,877,985
12	GROUP HOMES		1,984,920	1,984,920
13	HOMELESS BEDS		183,480	183,480
14	PA/PG		3,854,737	3,854,737
15	RESIDENTIAL REHAB		956,358	956,358
16	SSA		470,334	470,334
17	TRC CONTRACT		3,191,967	3,191,967
18	VALUE OPTIONS		375,230	375,230
19	VARIANCE DUE TO ROUNDING	(25)		(25)
20	Total Adjustments	(9,140,763)	(22,107,099)	(31,247,862)

### CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY ALLOCATION OF COSTS TO MODES OF SERVICE MH 1964 (08/04)

### DEPARTMENT OF MENTAL HEALTH

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY

	Legal Entity: COUNTY OF ORANGE	A
Le	gal Entity Number: 00030	Total
		Costs
1_	Mode Costs (Direct Service and MAA) from MH 1960	68,740,584
	Modes	
2	Hospital Inpatient Services (Mode 05-SFC 10-19)	
3	Other 24 Hour Services (Mode 05-All Other SFC)	6,132,926
4	Day Services (Mode 10)	2,398,319
5	Outpatient Services (Mode 15 Program 1 + Program 2)	53,413,935
6	Outreach Services (Mode 45)	183,480
7	Medi-Cal Administrative Activities (Mode 55)	2,284,372
8	Support Services (Mode 60)	4,327,552
9	Total - Lines 2 through 8	68,740,584

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

	County: ORANGE COUNTY County Code: 30			CR	CR				
		<del></del>		В	C	D	<del></del>		
10-	Legal Entity: COUNTY OF ORANGE		A		Service		Service	Service	G Service
rec	gal Entity Number: 00030			Service		Service			
<u> </u>	Mode: 05 - Other 24 Hour Services (All	Other SFC)	Mode Total	Function	Function	Function	Function	Function	Function
L				60	30		l	L	
1	Allocation Percentage		100.00%	47.96%	52.04%		L		
2 _	Total Units			97,548	14,973		ł	1	-
3	Gross Cost		6,132,926	2,941,278	3,191,648				i
			100000000000000000000000000000000000000		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		<u> </u>	<u> </u>	1212-121-1212-121-1212-121-1212-1212-1211-1212-
4	Cost per Unit			30.15	213.16		!	<b></b>	
5	SMA per Unit							<b></b>	
6	Published Charge per Unit							<u> </u>	
7	Negotiated Rate / Cost per Unit	<del>-</del>							
- · · · ·	<u> </u>				Andre Charles States and	<u>ingina pangan</u>	and the first of the second		11.00.000.000.000.000.000.000.000.000.0
8	Medi-Cal Units	07/01/03 - 09/30/03					!	<u> </u>	
8A		10/01/03 - 06/30/04						<u> </u>	
9	Madiana /Madi Gal Garana and Unite	07/01/03 - 09/30/03			_		1		
9A	Medicare/Medi-Cal Crossover Units	10/01/03 - 06/30/04							
10	- <del></del>	07/01/03 - 09/30/03	<del>liikiiliiniilii</del>				<del></del>	<del> </del> -	
10A	Enhanced SD/MC (Children) Units			<b> </b>	<b></b>		<del> </del>	<del> </del>	<b></b>
		10/01/03 - 06/30/04		ļ	l ———			<del> </del>	
_	Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04					ļ	<b></b>	<b></b>
11	Healthy Families (SED) Units	07/01/03 - 09/30/03		l			L		
11A	Treamy rannies (OLD) Onits	10/01/03 - 06/30/04							
12	Non-Medi-Cal Units	<del></del>		97,548	14,973		1	1	1
10110						natural distribution	and the second	Section Constitution	<u> </u>
13	Medi-Cal Costs	07/01/03 - 09/30/03	<b>\</b>	[ _					Ĺl
13A	Medical Costs	10/01/03 - 06/30/04			]				
14		07/01/03 - 09/30/03						1	
14A	Medi-Cal SMA Upper Limits	10/01/03 - 06/30/04	<del> </del>					<del> </del>	
			<del> </del>	<del> </del>	<del> </del>		<del> </del>	<del> </del> -	<del></del>
15	Medi-Cal Published Charges	07/01/03 - 09/30/03	<del> </del>	ļ	<b> </b>		<del> </del>	<del> </del>	<b> -</b>
15A		10/01/03 - 06/30/04	1						
16	Medi-Cal Negotiated Rates	07/01/03 - 09/30/03	l	·			i	<u> </u>	ł
16A	Medi-Car regulated Nates	10/01/03 - 06/30/04							
1.5			<u> </u>	<u> </u>			1900/1900/1900		
17	Medicare/Medi-Cal Crossover Costs	07/01/03 - 09/30/03					<del> </del>	<u> </u>	L
17A		10/01/03 - 06/30/04		l	L <u>_</u>			<u></u>	<b> </b>
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/03 - 09/30/03		1					]
18A	Medicare/Medi-Car Crossover Sivia Opper Limits	10/01/03 - 06/30/04							
19		07/01/03 - 09/30/03	·	<del></del>				<del>                                     </del>	
19A	Medicare/Medi-Cal Crossover Published Charges	10/01/03 - 06/30/04	+	<del> </del>		<del> </del>	<del></del> -	<b></b>	<del> </del>
	<del></del>		+	<del></del>	<del> </del>		<del> </del>		ł ———
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/03 - 09/30/03	<del> </del>	ļ <u>.</u>	<b>!</b>	ļ <u></u>		<u> </u>	<b></b>
20A		10/01/03 - 06/30/04			L		l	<u> </u>	
21	<u>a en en en el el deste del el e</u>	07/01/03 - 09/30/03	<u> 4-14-14-14-14-14-1</u>	<u> स्वरंगनेय विद्याप्त</u>	<u> 1919(919191919191919</u>	<u> </u>	<u>potential de la leta</u>	<u> </u>	<u> </u>
	Enhanced SD/MC Costs		<del> </del>	<del> </del>	<del></del>		<del> </del>	ļ	<del> </del>
21A	<del></del>	10/01/03 - 06/30/04	<del> </del>	<del> </del>	<b>_</b>	<del></del>	<del></del>		<b> </b>
22	Enhanced SD/MC SMA Upper Limits	07/01/03 - 09/30/03	L					<u> </u>	
22A		10/01/03 - 06/30/04	L	Ĺ		L	l	l	L
23	Calanda Barra Barra	07/01/03 - 09/30/03		1					
23A	Enhanced SD/MC Published Charges	10/01/03 - 06/30/04							
24	<del></del>	07/01/03 - 09/30/03	<del> </del>	<del> </del>	<del> </del> -	<del> </del>	<del> </del>	<del> </del>	<del> </del>
	Enhanced SD/MC Negotiated Rates		<del> </del>	<del> </del>	<del> </del>	<b></b>	<u> </u>	<del> </del>	<del> </del>
24A		10/01/03 - 06/30/04	1.5.00.5	L	1	Land Company	1000 CO. C.	1	L
25	Enhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04			<u> </u>		1	1	
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/03 - 06/30/04	<del> </del>	<del> </del>	<del> </del>		<del></del>	<del></del>	<del> </del>
			+	<del> </del>	<del></del>	<del></del>	<del> </del>	<del> </del>	<del> </del>
27	Enhanced SD/MC (Refugees) Published Charges	07/01/03 - 06/30/04	!	<del> </del>	<del> </del>	ļ	<u> </u>	<del></del>	ļ
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04	<u> </u>		L	L	L	<u></u>	<u> </u>
20	<u>ॱॾॾॹॹॾज़ऻॹऺढ़ॳॳॶॏॳॳढ़ॳॳॷॼॼॷॼॹॹॹॹख़ऄॹॹऄ॒क़ॴॶॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗॗ</u>	07/01/03 - 09/30/03			<u> </u>	<u> </u>		<u>क्राच्याच्याच्याच्या</u>	
29	Healthy Families Costs		<del> </del>	<b>!</b>	<del> </del>	<b></b>	<del> </del>	<del> </del>	<del> </del>
29A	L-i	10/01/03 - 06/30/04	<u> </u>	L			<u> </u>	<u> </u>	L
30	Healthy Families SMA Upper Limits	07/01/03 - 09/30/03		ł	ł <del> </del>	L _ :			
30A	Treating Fairnies Sivia Opper Cities	10/01/03 - 06/30/04						1	
31		07/01/03 - 09/30/03	<del> </del>	<del> </del>	<del> </del>		<del> </del>	<del> </del>	
31A	Healthy Families Published Charges		+	<del> </del>	<del> </del>	<del> </del>	<del></del>	+	<b> </b>
		10/01/03 - 06/30/04	<b> </b>	<del></del>	<del> </del>	<b> </b>	<del> </del>	<b>_</b>	<del>   </del>
32	Healthy Families Negotiated Rates	07/01/03 - 09/30/03					<del></del>	<u> </u>	ļ
32A		10/01/03 - 06/30/04					j		{
22.00			aparata and and an area	(10 miles	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> Sarangan Sarah</u>	4.5.0.5.0.5.0.0.5.0.5.0.5.0.5	. <u>4 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - </u>	<u> </u>

6,132,926 2,941,278 3,191,648

33 Non-Medi-Cal Costs

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY
County Code: 30

	County: ORANGE COUNTY County Code: 30			CR					
	Legal Entity: COUNTY OF ORANGE			В	C	D	E		G
Lea	al Entity Number: 00030		<del></del>	Service	Service	Service	Service	Service	Service
	Mode: 10 - Day Services		Mode Total	Function	Function	Function	Function	Function	Function_
				20					
	Allocation Percentage		100.00%	100.00%					
	Total Units			39,478			<b> </b>	ļ	<b> </b>
3	Gross Cost	samana and and and a	2,398,319	2,398,319			2010-01-01-01-01-01-01-01-01-01-01-01-01-		
	Cost per Unit			60.75					
	SMA per Unit			85.68					
6	Published Charge per Unit			85.68					
7	Negotiated Rate / Cost per Unit							anarakan na daga ata	***************************************
8	Medi-Cal Units	07/01/03 - 09/30/03		2,113					
A8		10/01/03 - 06/30/04		6,983					
9	Medicare/Medi-Cal Crossover Units	07/01/03 - 09/30/03							
9A		10/01/03 - 06/30/04				ļ <u></u>	ļ		<b> </b>
10	Enhanced SD/MC (Children) Units	07/01/03 - 09/30/03					<b> </b>		<b> </b> -
10A	Enhanced SD/MC (Refugees) Units	10/01/03 - 06/30/04					<b></b>	<b></b>	<b> </b>
_	Ennanced SD/MC (Refugees) Units	07/01/03 - 06/30/04			ļ		l	ļ	<del> </del>
11 11A	Healthy Families (SED) Units	07/01/03 - 09/30/03		<del></del> '	<del> </del>		ļ- <del></del>	<del> </del>	<del> </del>
	Non-Medi-Cal Units	10/01/03 - 06/30/04		20.302	<b> </b>	<del> </del>			<del> </del>
990	non meoroai omio Dostrigas i <u>ngrasijas baranas <mark>t</mark>antīgas kantīgas i</u> ngr	<u> </u>		30,382	<u> </u>	ne <del>ronania</del>	<u> </u>		<u> </u>
13	Medi-Cal Costs	07/01/03 - 09/30/03	128,366	128,366					
13A		10/01/03 - 06/30/04	424,223	424,223		l		L	ł
14	Medi-Cal SMA Upper Limits	07/01/03 - 09/30/03	181,042	181,042		<u> </u>	ļ. <u></u>	<b></b>	<u> </u>
14A		10/01/03 - 06/30/04	598,303	598,303		[		<b></b>	ļ
15 15A	Medi-Cal Published Charges	07/01/03 - 09/30/03 10/01/03 - 06/30/04	181,042 598,303	181,042 598,303	<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>
16		07/01/03 - 09/30/03	390,303	290,303	<b></b>	<del> </del>	<del></del>	<del></del>	<del> </del>
16A	Medi-Cal Negotiated Rates	10/01/03 - 06/30/04	<del> </del>		<del></del>	<del></del>	<del> </del>	<del></del>	<del></del>
	<u> Para para di  Para para para para para para para par</u>		444444	<u> स्टब्स्यस्य स्टब्स्</u>		<u>arrananan</u>	<u> </u>	<u>स्वयञ्चयमञ्जय</u>	angerene.
17	Medicare/Medi-Cal Crossover Costs	07/01/03 - 09/30/03	ļ	<u> </u>	<b></b>	<del></del>	<b></b>		<u> </u>
17A		10/01/03 - 06/30/04	ļ		[		<b> </b>	<b> </b> -	ļ
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/03 - 09/30/03	<del>                                     </del>			<del> </del>	<del> </del>		<del> </del>
18A	_ <del></del>	10/01/03 - 06/30/04	<del> </del>		ļ	<del> </del> -	<del> </del>	ļ ———	<del> </del>
19 19A	Medicare/Medi-Cal Crossover Published Charges	07/01/03 - 09/30/03 10/01/03 - 06/30/04	<del> </del>	<b></b>	l	<b></b> -	<del> </del>	<del> </del>	<b></b>
20		07/01/03 - 09/30/03	+	-	<del> </del>	<del> </del>	+	<del> </del>	<del> </del>
20A	Medicare/Medi-Cal Crossover Negotiated Rates	10/01/03 - 06/30/04	<del></del>			<del></del>	<del> </del>	<del></del>	<del> </del>
-:::::::::::::::::::::::::::::::::::::			<u> Paradianagan</u>		121201213121313	0.0000000000000000000000000000000000000	0.000.000.000	<u>anajaniana</u>	<u> </u>
21	Enhanced SD/MC Costs	07/01/03 - 09/30/03	<b></b>	<b> </b>	<b></b>	<b> </b>	<b></b>	ļ	ļ
21A	<u> </u>	10/01/03 - 06/30/04	<del> </del>	<del> </del>	ļ	<b></b>	<del> </del>	<del> </del>	<u> </u>
22	Enhanced SD/MC SMA Upper Limits	07/01/03 - 09/30/03	<del> </del>		<del> </del>	<del></del>	<del></del>	<del></del>	<del> </del>
22A	<u> </u>	10/01/03 - 06/30/04	<del> </del>	ļ	<b></b>	<del> </del>	<del> </del>	<del> </del>	<del> </del>
23	Enhanced SD/MC Published Charges	07/01/03 - 09/30/03	<del> </del>	<b></b> _	<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>
23A		10/01/03 - 06/30/04	<del> </del>	<b></b>	<del> </del>	<del></del>	<del> </del>	<del> </del>	<del> </del>
24 24A	Enhanced SD/MC Negotiated Rates	07/01/03 - 09/30/03 10/01/03 - 06/30/04	<del> </del>	<u> </u>	<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>
	<u>a ganta ang padagan ang padagan ang padagan</u>	<u> Augusta paga a bang kabupatan baga</u>	250.000.000.000	and and and			<u> </u>		200000000000000000000000000000000000000
	Enhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04			ļ	1	ļ	L	<u> </u>
	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/03 - 06/30/04	ļ					ļ	<u></u>
	Enhanced SD/MC (Refugees) Published Charges	07/01/03 - 06/30/04	<b></b>	ļ	<del> </del>	<b> </b>	<del> </del>	ļ	<b>↓</b>
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04			<u> </u>	<del>[</del>	************	 	
29	Healthy Earnilies Costs	07/01/03 - 09/30/03	1			1	1	1	1
29A	Healthy Families Costs	10/01/03 - 06/30/04							
30	Healthy Families SMA Upper Limits	07/01/03 - 09/30/03							
30A	meanity ramilles SIVIA Opper Limits	10/01/03 - 06/30/04							
31	Healthy Families Published Charges	07/01/03 - 09/30/03							
31A	meanity rainines rubished Charges	10/01/03 - 06/30/04							
32	Healthy Families Negotiated Rates	07/01/03 - 09/30/03							
	THE STATE OF THE S	10/01/03 - 06/30/04						1	
32A		10/01/03 - 06/30/04							

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

IVIT	1906 (08/04)							FISCAL TEAT	( 2003 - 2004
	County: ORANGE COUNTY								
	County Code: 30			CR	CR	CR	CR	CR	CR
	Legal Entity: COUNTY OF ORANGE		A	В	Č	D	E	F	G
Le	gal Entity Number: 00030			Service	Service	Service	Service	Service	Service
	Mode: 15 - Outpatient (Program 1)		Mode Total	Function	_Function	Function _	Function_	Function	Function
				01	10	30	40	50	60
1	Allocation Percentage		100.00%	26.88%	4.63%	18.63%	16.31%	2.90%	23.04%
3	Total Units			7,336,625	1,013,481	4,046,817	3,380,331	613,743	2,500,151
3_	Gross Cost		47,847,387	12,859,341	2,214,691	8,915,557	7,803,577	1,386,019	11,025,981
4	Cost per Unit			1.75	2.19	2.20	2.31	2.26	4.41
5	SMA per Unit			1.83	2.36	2.36	2.36	2.36	4.37
6	Published Charge per Unit			1.83	2.36	2.36	2.36	2.36	4.37
7_	Negotiated Rate / Cost per Unit								
8	Sandandanian Sandan Zarian aparapas in in in	07/01/03 - 09/30/03		636,433	38,423	294,468	251,866	20,407	223,183
A8	Medi-Cal Units	10/01/03 - 06/30/04		1.874.057	150,180	912,385	783,013	75,326	649,503
9		07/01/03 - 09/30/03					6,781	418	11,545
8 8A 9 9A 10	Medicare/Medi-Cal Crossover Units	10/01/03 - 06/30/04				35	10,452	1,419	21,617
10	F-b CDMO (Children) II-ib-	07/01/03 - 09/30/03		644	1,022	457	403	113	409
10A	Enhanced SD/MC (Children) Units	10/01/03 - 06/30/04		4,264	2,438	3,097	2,783	1,067	2,878
10E	Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04							
11	Healthy Families (SED) Units	07/01/03 - 09/30/03		143	512	340	379		140
11A	Treating Farmines (SED) Onits	10/01/03 - 06/30/04		2,113	2,547	3,616	3,335	306	1,159
12	Non-Medi-Cal Units			4,818,971	818,359	2,832,419	2,321,319	514,687	1,589,717
13		07/01/03 - 09/30/03	3,594,226	1,115,514	83,963	648,744	581,439	46,085	984,265
13 13A 14	Medi-Cal Costs	10/01/03 - 06/30/04	11,035,070	3,284,772	328,178	2,010,079	1,807,605	170,109	2,864,390
14	Madi Cal CMA Harra Limita	07/01/03 - 09/30/03	3,710,976	1,164,672	90,678	694,944	594,404	48,161	975,310
14A	Medi-Cal SMA Upper Limits	10/01/03 - 06/30/04	11,407,604	3,429,524	354,425	2,153,229	1,847,911	177,769	2,838,328

2   Total Units	1	Allocation Percentage		100.00%	26.88%	4.63%	18.63%	16.31%	2.90%	23.04%
SMA per Unit   SMA	2	Total Units			7,336,625	1,013,481	4,046,817	3,380,331	613,743	2,500,151
S. SMA, Per Unit	3	Gross Cost		47,847,387	12,859,341	2,214,691	8,915,557	7,803,577	1,386,019	11,025,981
S. SMA, Per Unit	4	Cost per Unit	1272121212121212121272727272727272		1.75	2.19	2.20	2.31	2.26	4.41
B	5									4.37
A		Published Charge per Unit								
BA   Medicare/Medi-Cal Crossover Units   1001/03-06/30/04   1,874,097   150,180   912,385   783,013   75,326   549,503   584,603   584		Negotiated Rate / Cost per Unit								
BA   Medicare/Medi-Cal Crossover Units   1001/03-06/30/04   1,874,097   150,180   912,385   783,013   75,326   549,503   584,603   584	0	<u>enakurakurakurakurakurakurakurakurakurakur</u>	07/04/02 00/20/02		626 122	20 422	204.469	251 966	20.407	222 102
Medicare/Medi-Cal Crossover Units		Medi-Cal Units								
SA					1,074,037	730,700	512,505			
Financed SD/MC (Children) Units		Medicare/Medi-Cal Crossover Units					35			
TOA   Freninces SDMC (Fedreses) Units   100103 - 95/30004   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/0103 - 95/30003   107/		<del></del>				1 022				
Tobs   Embanaced SDIMC (Refuguese) Units   070103 - 9030003   143   512   340   379   140   111   14		Enhanced SD/MC (Children) Units								
Healthy Families (SED) Urits	_	Enhanced SD/MC (Refugees) Units			4,204	2,430		2,703	1,007	2,070
11A  Presently Fallines (SEC) Units   100/10/3 - 09/30/04   \$38888   \$4,189.971   \$18,089.71   \$3,086   \$3,335   \$30.6   \$1,159   \$1.00   \$1,000					143	512	340	370		140
12 Non-Medi-Cal Units		Healthy Families (SED) Units							206	
13   Medi-Cal Costs		Non-Medi-Cal Units	10/01/03 - 00/30/04							
19A   Medi-Cal SMA Upper Limits	1.22	confirmation of the forest confirmation of the f	popular de la companya de la company			200		<del>, and a spire a</del>	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
1934   Medi-Cal SMA Upper Limits		Medi-Cal Costs								
14A0   Medi-Carl SMA Upper Limits   10001/03 - 06/3004   11,407,604   3,429,524   354,425   2,153,229   1,847,911   177,769   2,838,328   16										
14A		Medi-Cal SMA Upper Limits								
155A   Medicare Med										
19A		Medi-Cal Published Charges								
166   Neur-Lat Neglutater Rates   10/01/03 - 08/30/04   15,654   944   50,915		· ·		11,407,604	3,429,524	354,425	2,153,229	1,847,911	177,769	2,838,328
15A		Medi-Cal Negotiated Rates								
TAX   Medicare/Medi-Cal Crossover SMA Upper Limits   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/04   122,554   83   24,567   3,349   94,465   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   10/01/03 - 09/30/04   10/01/03 - 09/30/03   10/01/03 - 09/30/04   10/01/03 - 09/30/03   10/	16A		10/01/03 - 06/30/04				<del></del>			· · · · · · · · · · · · · · · · · · ·
TAX   Medicare/Medi-Cal Crossover SMA Upper Limits   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/04   122,554   83   24,567   3,349   94,465   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   67,836   16,003   986   50,452   10/01/03 - 09/30/03   10/01/03 - 09/30/04   10/01/03 - 09/30/03   10/01/03 - 09/30/04   10/01/03 - 09/30/03   10/	17		07/01/03 - 09/30/03	67 884		***********		15 654	944	50 915
Redicare/Medi-Cal Crossover SMA Upper Limits   07/01/03 - 09/30/03   67,836   83   24,667   3,349   94,466   19		Medicare/Medi-Cal Crossover Costs					77			
1884   Medicare/Medi-Cal Crossover Published Charges   10/10/3 - 08/30/04   122,554   83   24,567   3,349   94,466   97/01/03 - 08/30/03   67,836   83   24,667   3,349   94,466   97/01/03 - 08/30/03   122,554   83   24,667   3,349   94,466   97/01/03 - 08/30/03   98,650,452   94,466   97/01/03 - 08/30/03   98,000										
19		Medicare/Medi-Cal Crossover SMA Upper Limits					83			
19A   Medicare/Medi-Cal Crossover Negotiated Rates   1001/03 - 06/30/04   122,564   83   24,667   3,349   94,466   200   Medicare/Medi-Cal Crossover Negotiated Rates   1001/03 - 06/30/04   21   Enhanced SD/MC Costs   07/01/03 - 09/30/03   7,358   1,129   2,233   1,007   930   255   1,804   214   2		11 F - 11 F 0 10 - 5 F 1 - 101								
Description   Process   Description   Desc		Medicare/Medi-Cai Crossover Published Charges					83			
20A		N		,						
Enhanced SD/MC Costs		medicare/medi-Cai Crossover negotiated Rates								
21A   Ellifarted SUMC Costs   10/01/03 - 06/30/04   47,771   7,474   5,328   6,823   6,425   2,410   12,692	10.00	<u> Bana ang paguang ang pag</u>								
227   Enhanced SD/MC SMA Upper Limits		Enhanced SD/MC Costs								
22A   Chillianteed SD/MC SMR Opper Limits   10/01/03 - 06/30/04   49,572   7,803   5,754   7,309   6,568   2,518   12,577										
23   Enhanced SD/MC Published Charges   07/01/03 - 09/30/03   7,674   1,179   2,412   1,079   951   267   1,787   10/01/03 - 06/30/04   49,572   7,803   5,754   7,309   6,568   2,518   12,577   24A   24A   Enhanced SD/MC Negotiated Rates   07/01/03 - 09/30/03   10/01/03 - 06/30/04   25   Enhanced SD/MC (Refugees) Costs   07/01/03 - 06/30/04   26   Enhanced SD/MC (Refugees) SMA Upper Limits   07/01/03 - 06/30/04   27   Enhanced SD/MC (Refugees) Negotiated Rates   07/01/03 - 06/30/04   28   Enhanced SD/MC (Refugees) Negotiated Rates   07/01/03 - 06/30/04   29   Healthy Families Costs   07/01/03 - 09/30/03   3,611   251   1,119   749   875   617	22	Enhanced SD/MC SMA Upper Limits								
23A   Enhanced SD/MC Published Charges   10/01/03 - 06/30/04   49.572   7,803   5,754   7,309   6,568   2,518   12,577     24		<del> </del>								
24   24A		Enhanced SD/MC Published Charges								
24A   Enhanced SD/MC (Refugees) Costs   10/01/03 - 06/30/04		<del> </del>		49,5/2	7,803	5,754	7,309	0,068	∠,518	12,377
Enhanced SD/MC (Refugees) Costs   07/01/03 - 06/30/04		Enhanced SD/MC Negotiated Rates		<b> </b>	<b> </b>					<del> </del>
26   Enhanced SD/MC (Refugees) SMA Upper Limits   07/01/03 - 06/30/04	24A		10/01/03 - 06/30/04	220120000000000000000000000000000000000	1 2524225-555	0. <u>200.200.000</u>	<u> </u>	<u> </u>		   <u> </u>
27   Enhanced SD/MC (Refugees) Published Charges   07/01/03 - 06/30/04     28   Enhanced SD/MC (Refugees) Negotiated Rates   07/01/03 - 06/30/04     29   Healthy Families Costs   07/01/03 - 09/30/03   3,611   251   1,119   749   875   617   10/01/03 - 06/30/04   32,930   3,704   5,566   7,966   7,699   691   5,111   30A   30A   30A   30A   30B	25	Enhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04							i
27   Enhanced SD/MC (Refugees) Published Charges   07/01/03 - 06/30/04     28   Enhanced SD/MC (Refugees) Negotiated Rates   07/01/03 - 06/30/04     29   Healthy Families Costs   07/01/03 - 09/30/03   3,611   251   1,119   749   875   617   10/01/03 - 06/30/04   32,930   3,704   5,566   7,966   7,699   691   5,111   30A   30A   30A   30A   30B		Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/03 - 06/30/04							
28         Enhanced SD/MC (Refugees) Negotiated Rates         07/01/03 - 06/30/04         251         1,119         749         875         617           29A         Healthy Families Costs         07/01/03 - 06/30/04         32,930         3,704         5,586         7,966         7,699         691         5,111           30A         30A         30A         10/01/03 - 06/30/04         34,403         3,867         6,011         8,534         7,871         722         5,065           31         31         Healthy Families Published Charges         07/01/03 - 06/30/04         34,403         3,867         6,011         8,534         7,871         722         5,065           32         32A         Healthy Families Negotiated Rates         07/01/03 - 09/30/03         34,403         3,867         6,011         8,534         7,871         722         5,065										
Healthy Families Costs   07/01/03 - 09/30/03   3,611   251   1,119   749   875   617	28	Enhanced SD/MC (Refugees) Negotiated Rates								
10/01/03 - 06/30/04   32,930   3,704   5,586   7,966   7,699   691   5,111	20	<u> </u>		2.044	200000000000000000000000000000000000000	4 440	740	075	<u> </u>	617
30   Healthy Families SMA Upper Limits		Healthy Families Costs							601	
30A   Reality Families SWA Opper Limits   10/01/03 - 06/30/04   34,403   3,867   6,011   8,534   7,871   722   5,065   31   Healthy Families Published Charges   07/01/03 - 09/30/03   3,779   262   1,208   802   894   612   10/01/03 - 06/30/04   34,403   3,867   6,011   8,534   7,871   722   5,065   32   32A   Healthy Families Negotiated Rates   07/01/03 - 06/30/04   10/									091	
31   Healthy Families Published Charges		Healthy Families SMA Upper Limits							700	
31A   Realtry Families Published Charges   10/01/03 - 06/30/04   34,403   3,867   6,011   8,534   7,871   722   5,065     32		<del> </del>							122	
32   Healthy Families Negotiated Rates   07/01/03 - 09/30/03   10/01/03 - 06/30/04		Healthy Families Published Charges							722	
32A readily ramines Regolated Rates 10/01/03 - 06/30/04 10/01/03 - 06/30/04		<del> </del>		34,403	3,867	6,011	8,534	1,8/1	122	5,005
🚾 ಅಲಾರಾ ಚಿನಾಗವಾರರು ಮುಂದು ಮುಂದು ಮುಂದು ಪ್ರಕ್ರಾಗ ಪ್ರಕ್ರಗ ಪ್ರಕ್ರಿಸಿ ಪ್ರಕ್ರಾಗ ಪ್ರಕ್ರಗ ಪ್ರಕ್ರಾಗ ಪ್ರಕ್ರಾಗ ಪ್ರಕ್ರಗ ಪ್ರವಸ್ತ ಪ್ರಕ್ರಗ ಪ್ರಕ್ರ ಪ್ರಕ್ಷ ಪ್ರಕ್ಷ ಪ್ರಕ್ರ ಪ್ರಕ್ಷ ಪ್ರವಸ್ತ ಪ್ರಕ್ರ ಪ್ರಕ್ಷ ಪ್ರಕ್ಷ ಪ್ರಕ್ಷ ಪ್ರಕ್ಷ ಪ್ರಕ್ಷ ಪ್ರಕ್ಷ ಪ್ರವಕ್ಷ ಪ್ರಕ್ಷ		Healthy Families Negotiated Rates		ļ	<del> </del>	<del></del>	ļ <del></del> -	<del></del>	<del></del>	<del> </del>
33   Non-Medi-Cal Costs   32,935,793   8,446,498   1,788,304   6,240,112   5,358,822   1,162,320   7,010,852	SZA.	( <del>NA PROPINSTANTANTANTANTANTANTANTANTANTANTANTANTAN</del>	10/01/03 - 06/30/04		and discount for		। चन्द्रवादासम्बद्धाः	Granda Graffe	<u>Genegalan</u> ⊊r	harana ana
	33	Non-Medi-Cal Costs		32,935,793	8,446,498	1,788,304	6,240,112	5,358,822	1,162,320	7,010,852

### DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY County Code: 30		CR	CAW	CAW	CAW	CAW	CAW	CAW
Legal Entity: COUNTY OF ORANGE	<del></del>	H T						N
Legal Entity Number: 00030		Service	Service	Service	Service	Service	Service	Service
Mode: 15 - Outpatient (Program 1)		Function	Function	Function	Function	Function	Function	Function
Mode: 15 - Outpatient (1 Togram 1)		70	01	10	30	40	50	60
1 Allocation Percentage		6.51%	0.64%	0.01%	0.10%	0.27%	0.02%	0.05%
2 Total Units		942,132	140,266	1,178	16,823	45,554	3,594	4,489
3 Gross Cost		3,116,805	308,254	3,367	48,083	130,200	10,272	23,558
								<u> </u>
4 Cost per Unit		3.31	2.20	2.86	2.86	2.86	2.86	5.25
5 SMA per Unit		3.52	1.83	2.36	2.36	2.36	2.36	4.37
6 Published Charge per Unit		3.52	1.83	2.36	2.36	2.36	2.36	4.37
7 Negotiated Rate / Cost per Unit		1712-1712-1712-1712-1712-1712-1712-1712						***********
Medi-Cal Units	07/01/03 - 09/30/03	40,570						
8A Medi-oai onids	10/01/03 - 06/30/04	172,278						
9 Medicare/Medi-Cal Crossover Units	07/01/03 - 09/30/03	112						
9A Medicarenivedi-Car Crossover Units	10/01/03 - 06/30/04							
10	07/01/03 - 09/30/03							
Enhanced SD/MC (Children) Units	10/01/03 - 06/30/04	2,001					<del></del>	
10B Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04							
11	07/01/03 - 09/30/03							
Healthy Families (SED) Units	10/01/03 - 06/30/04	663						
12 Non-Medi-Cal Units	10/01/03 - 00/30/04	726,508	140,266	1,178	16,823	45,554	3,594	4,489
	grander der der Section		140,200	1,170	10,023	40,004	3,054	4,409
Medi-Cal Costs	07/01/03 - 09/30/03	134,216						
13A Wedi-Cai Costs	10/01/03 - 06/30/04	569,938						
Medi-Cal SMA Upper Limits	07/01/03 - 09/30/03	142,806						
14A Medi-Cai SMA Opper Littis	10/01/03 - 06/30/04	606,419						
15 Madi Cal Bublished Characa	07/01/03 - 09/30/03	142,806						
Medi-Cal Published Charges	10/01/03 - 06/30/04	606,419						
16 Mari Cal Name Vista d Dates	07/01/03 - 09/30/03							
Medi-Cal Negotiated Rates	10/01/03 - 06/30/04							
	<del>d S<u>rap</u> George and and the</del>				174115 BEEFE		***********	
17 Medicare/Medi-Cal Crossover Costs	07/01/03 - 09/30/03	371						
17A	10/01/03 - 06/30/04							
Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/03 - 09/30/03	394						
[18A]	10/01/03 - 06/30/04	ļ l						
Medicare/Medi-Cal Crossover Published Charges	07/01/03 - 09/30/03	394						
19A	10/01/03 - 06/30/04	Ĺ						
Medicare/Medi-Cal Crossover Negotiated Rates	07/01/03 - 09/30/03	l					1	
20A Medical el Medical	10/01/03 - 06/30/04							
21	07/01/03 - 09/30/03			404000000000	<u> </u>			<u> </u>
21A Enhanced SD/MC Costs	10/01/03 - 06/30/04	6,620				<del></del>		<del></del>
22	07/01/03 - 09/30/03	0,020				<del></del>	<del></del>	<del></del>
22A Enhanced SD/MC SMA Upper Limits	10/01/03 - 06/30/04	7,044		<del> </del> -	<del> </del>			
23 5 6 6 7 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7		7,044		<del> </del> -		<del></del>		
23 Enhanced SD/MC Published Charges	07/01/03 - 09/30/03	704					<del> </del>	
	10/01/03 - 06/30/04	7,044				ļ	<del> </del>	
Enhanced SD/MC Negotiated Rates	07/01/03 - 09/30/03	<b> </b>			ļ		<u> </u>	
24A Zimanes Solino regellates riales	10/01/03 - 06/30/04	<u> </u>		<u> </u>				************
25 Enhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04							
26 Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/03 - 06/30/04							
27 Enhanced SD/MC (Refugees) Published Charges	07/01/03 - 06/30/04	<del> </del>	<del></del>	<del> </del>		<del></del>	<del> </del> -	
28 Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04	<del>   </del>					<del> </del>	
	000000000000000000000000000000000000000	20000000000	***********		12 (12 (12 (12 (12 (12 (12 (12 (12 (12 (	erenenga dan ke		<u> </u>
Healthy Families Costs	07/01/03 - 09/30/03							
29A Healthy Families Costs	10/01/03 - 06/30/04	2,193						
30 Healthy Eamilies SMA Upper Limits	07/01/03 - 09/30/03							
30A Healthy Families SMA Upper Limits	10/01/03 - 06/30/04	2,334						
31	07/01/03 - 09/30/03			,				
Healthy Families Published Charges	10/01/03 - 06/30/04	2,334						
32	07/01/03 - 09/30/03	2,004						
Healthy Families Negotiated Rates	10/01/03 - 06/30/04	<u> </u>						
	, 0000004	<u>kanagaran</u> a	See See See See See	200000000	reserve to the			
33 Non-Medi-Cal Costs		2,403,468	308,254	3,367	48,083	130,200	10,272	23,558

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY

County Code: 30				

County Code, 30		0	P					T U
Legal Entity: COUNTY OF ORANGE Legal Entity Number: 00030	<del></del>	Service	Service	Q Service	R Service	Service	Service	Service
Mode: 15 - Outpatient (Program 1)		Function	Function	Function	Function	Function	Function	Function
		70	1 Discusii	1 dilettori	1 Brichon	Tunction	r director	r direction
Allocation Percentage		0.00%						
2 Total Units		398						
3 Gross Cost		1,682						
Cost per Unit		4.23	<u> 1900-1907-1900</u>		<u> </u>	<u> </u>	<u> </u>	<u>, projekt, aleman</u>
SMA per Unit		3.52		+			<del> </del>	<del> </del>
Published Charge per Unit		3.52		<del> </del>			<del> </del>	<del></del>
Negotiated Rate / Cost per Unit		3,02		<del>                                     </del>				
<u>, a pro-articular a la companya da /u>	07/04/00 00/00/00	<u> </u>	<u> </u>	<u> anne ann ann an an</u>	*.* <u>.*.*.*.*.</u> ;*;*.*.	<u> </u>	******* <u>******</u>	<u> </u>
Medi-Cal Units	07/01/03 - 09/30/03			<del></del>		ļ	<del> </del>	<u> </u>
BA Medi-cal Office	10/01/03 - 06/30/04			<del></del>	ļ	-	<del> </del>	<del></del>
Medicare/Medi-Cal Crossover Units	07/01/03 - 09/30/03						<del></del>	<del> </del>
10	10/01/03 - 06/30/04	<del></del>		<del> </del>	<b> </b>	<del> </del>	<del></del>	<del> </del>
Enhanced SD/MC (Children) Units	07/01/03 - 09/30/03 10/01/03 - 06/30/04				<del></del> -	ļ	<del></del>	<del> </del>
10B Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04			<del></del>	<del></del>	ļ <del></del> -	<del></del>	<u> </u>
11	07/01/03 - 08/30/04	<del></del>		<del></del>		<del>                                     </del>	<del></del>	<del> </del>
Healthy Families (SED) Units	10/01/03 - 06/30/04	├──		<del>                                     </del>		<del> </del>	<del> </del>	<del> </del>
12 Non-Medi-Cal Units	1 10/0 1/03 - 00/30/04	398		<del> </del>	<del></del>	<del>                                     </del>	<del> </del>	<del></del>
<u>arian jaran jangan Pangan dan mengangan beragai bangan dan pangan banggan banggan banggan banggan banggan bang</u>	<u> </u>	380	<u> Sanarijana</u>	<del> </del>	*** <u>****</u> ****	<u> </u>		<del></del>
13 Medi-Cal Costs	07/01/03 - 09/30/03			1	<b></b> _		1	L
13A	10/01/03 - 06/30/04			<del></del> -	<b> </b>	ļ	<b></b>	<del> </del>
Medi-Cal SMA Upper Limits	07/01/03 - 09/30/03			<u> </u>				<u> </u>
14A	10/01/03 - 06/30/04			ļ				<u> </u>
Medi-Cal Published Charges	07/01/03 - 09/30/03	<u> </u>		<u> </u>	<b></b>	<b></b> -	<del> </del>	ļ
15A	10/01/03 - 06/30/04			ļ	<u> </u>	<b></b>		<u> </u>
Medi-Cal Negotiated Rates	07/01/03 - 09/30/03			<del> </del>		<b></b>	ļ	<b></b> _
16A	10/01/03 - 06/30/04	********	**************		2.		*************	1,-,-,-,-,-,-,-,-
17 Medicare/Medi-Cal Crossover Costs	07/01/03 - 09/30/03				1			1
17A Medicare/Medi-Car Crossover Costs	10/01/03 - 06/30/04							
18 Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/03 - 09/30/03							
18A	10/01/03 - 06/30/04							
Medicare/Medi-Cal Crossover Published Charges	07/01/03 - 09/30/03							
19A	10/01/03 - 06/30/04				<u> </u>		<u> </u>	<u> </u>
Medicare/Medi-Cal Crossover Negotiated Rates	07/01/03 - 09/30/03				<u></u>		1	<u> </u>
20A Medicare/Medi-Car Grossover Negotiated Rates	10/01/03 - 06/30/04				<u></u>	<u> </u>	L	L
21	07/01/03 - 09/30/03		<u> </u>			1-		
Enhanced SD/MC Costs	10/01/03 - 06/30/04			<del> </del> -	<del> </del>	<del> </del> -	<del> </del>	<del> </del>
22	07/01/03 - 09/30/03			<del></del>	<del> </del> -		<del></del>	<del> </del>
Enhanced SD/MC SMA Upper Limits	10/01/03 - 06/30/04						<del> </del>	<del>                                     </del>
22	07/01/03 - 09/30/03	-		<del> </del>		<del> </del>	<del> </del>	<del>                                     </del>
Enhanced SD/MC Published Charges	10/01/03 - 06/30/04						1	<del> </del>
24	07/01/03 - 09/30/03	_		<del> </del>	<u> </u>	<del>                                     </del>	<del> </del>	
Enhanced SD/MC Negotiated Rates	10/01/03 - 06/30/04			<del> </del>	<del> </del>	ļ — — — — — — — — — — — — — — — — — — —	<del>                                     </del>	<del> </del>
<u>en para la del esperanti (esperante) esperanti (esperante) esperanti (esperanti (esperante) esperanti (esperan</u>	<u> </u>	<u></u>	<u> Paragorana di </u>	<u> </u>	. <u>175</u>	territoria.	<u> </u>	<u> </u>
25 Enhanced SD/MC (Refugees) Costs 26 Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/03 - 06/30/04			<del> </del>	<del> </del>	<del> </del> -	<del> </del>	+
27 Enhanced SD/MC (Refugees) SMA Upper Limits 27 Enhanced SD/MC (Refugees) Published Charges	07/01/03 - 06/30/04			<del> </del>	<del></del>	<del> </del>	<del> </del>	+
	07/01/03 - 06/30/04	<b></b>		<del> </del> -	<b> </b>	<del> </del> -	<del> </del>	<del> </del> -
28 Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04	<u>च्याच्याच्याच्या</u>	व्यवसम्बद्धाः	harana a	40,000,000,000		100000000000000000000000000000000000000	100000000
29 Healthy Families Costs	07/01/03 - 09/30/03							
29A	10/01/03 - 06/30/04							
Healthy Families SMA Upper Limits	07/01/03 - 09/30/03			1				
30A Realthy Families SMA Opper Limits	10/01/03 - 06/30/04							
31 Healthy Familian Bublished Charges	07/01/03 - 09/30/03							
Healthy Families Published Charges	10/01/03 - 06/30/04			1				1
32	07/01/03 - 09/30/03			1				
Healthy Families Negotiated Rates	10/01/03 - 06/30/04							
22 Non Modi Col Contr	<u>वेची, त्रमान चीत्रक्षण विद्यान विद्या</u> र्ग गर्मा गर्म	4.000	<u> 147-141-151-171-171</u>	the distriction in	40000000000000	<u> </u>	<u>बन्दर्भी ज्ञानन विकास</u>	4 (200)
33 Non-Medi-Cal Costs		1,682	L		<u> </u>	<del></del>		

CAW

County: ORANGE COUNTY

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL MH 1966 (08/04)

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

Legal Enthy, Moder 10303		County Code: 30			TBS	ASO	ASO	ASO	ASO	ASO
Mode: 19 - Outpatient (Program 2)		Legal Entity: COUNTY OF ORANGE		A	В	С	D	E		G
Allocation Percentage	Leg									
A placeation Ferreentage	⊢	Mode: 15 - Outpatient (Program 2)		Mode lotal						
Total Units	1	Allocation Percentage		100 00%						
September   Sept			<del></del>	100.007						
Section   Sect	3	Gross Cost		5,566,548						
Section   Sect	4	Cost per Unit	<u> </u>		1.91	1 47	1 73	1 73	1 73	2 68
Section   Company   Comp										
Medi-Cal Units	6	Published Charge per Unit								
Medicare/Medi-Cal Crossover Units	7	Negotiated Rate / Cost per Unit	·							
Medicare/Medi-Cal Crossover Units	8	atu kangang kanunun kanung <u>ang mang ng matu kang ng mang munung ang manung kang as</u> di kalang kahlan. Mang 180-180-180-180-180-180	07/01/03 - 09/30/03		33.100	720	2.205	39.540	840	4.140
9.A) Medicare/Medi-Cal Crossover Costs 1001/03 - 09/30/03 1004 1007 1005 1007 1007 1008 1007 1007 1008 1007 1007	8A	Medi-Cal Units								
100   Financed SD/MC Units		Medicare/Medi-Cal Crossover Units								
10A   Healthy Families (SED) Units										
10A		Enhanced SD/MC Units								
11   Healthy Families (SED) Units										
11A   Ner-Medi-Gal Units   1001/03 - 06/30/04   30,331   105		Ennanced SD/MC (Refugees) Units					-			
12   Non-Medi-Cal Units   30,331   155   4,200   105   255   13   13   13   14   14   14   15   14   15   14   15   14   15   14   15   14   15   14   15   14   15   15		Healthy Families (SED) Units					105			
13		Non-Medi-Cal Units	10/01/03 - 06/30/04		30 224				105	255
1001/03 - 06/30/04   1/21	101010		Territoria		<u>, ha takututut jarak</u>	rananan agan agan saran	100000000000000000000000000000000000000	. * . * . * . <del>* . <u>* . * .</u> * . * .</del> * . * .	tereteration and engine	11111111111111111
14   Medi-Cal SMA Upper Limits	-	Medi-Cal Costs								
14AA   Medi-Cal Published Charges										
15		Medi-Cal SMA Upper Limits								
15A   Medi-Cal Negotiated Rates   1001/03 - 06/30/04		<del></del>		5,214,945	237,189	3,294	8,885	337,008	2,195	37,822
16		Medi-Cal Published Charges							<del></del>	
1964					_					-
177   Medicare/Medi-Cal Crossover Costs		Medi-Cal Negotiated Rates								
177A	17	<u>ស្ថានស្រាកការតែបានប្រជាជាក្នុងការប្រជា្ជិកការប៉ូលាបិត្តការប្រជាពិការបានប្</u> មានការប្រជាពិការបានប្រជាពិការបានប្រជាពិការបានប្រជាពិការបានប្រជាពិការបានបង្ហាយ ប្រជាពិការបានបង្ហាយ បង្ហាយ ប្រជាពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្យាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បងពិការបានបង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្ហាយ បង្យ	40000000000000000000000000000000000000	NEW CONTRACTOR				0000000000		2002233333
18		Medicare/Medi-Cal Crossover Costs		1 721						
1984				1,721				·		
19   Medicare/Medi-Cal Crossover Published Charges   07/01/03 - 09/30/03   10/01/03 - 06/30/04   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/04   10/01/03 - 09/30/03   10/01/03 -		Medicare/Medi-Cal Crossover SMA Upper Limits		2.315						
19A		Madisars/Madi Cal Cassassas Bublished Change								
10/01/03 - 06/30/04   10/01/03 - 06/30/04   13,582   10/01/03 - 06/30/04   13,582   10/01/03 - 06/30/04   14,817   10/01/03 - 06/30/04   14,817   10/01/03 - 06/30/04   14,817   10/01/03 - 06/30/04   14,817   10/01/03 - 06/30/04   14,817   10/01/03 - 06/30/04   14,817   10/01/03 - 06/30/04   14,817   10/01/03 - 06/30/04   14,817   10/01/03 - 06/30/04   10/01/03 - 06/30/0	19A	Medicare/Medi-Cai Crossover Published Charges	10/01/03 - 06/30/04							
21		Medicare/Medi-Cal Crossover Negotiated Rates								
21A   Enhanced SD/MC C68s   10/01/03 - 06/30/04   13,582	20A	Wed/Care/Wedi-Oa/ Clossover Wegotiated Nates	10/01/03 - 06/30/04	L						
21A   Enhanced SD/MC SMA Upper Limits   10/01/03 - 06/30/04   13,582	21	Entraned ODAIO Contr	07/01/03 - 09/30/03	3.687	<u> </u>			<u> </u>		
Enhanced SD/MC SMA Upper Limits		Enhanced SD/MC Costs								
23	22	Enhanced SD/MC SMA Unner Limite								
23A		Enhanced Solvic Sivia Opper Limits		14,617						
10/01/03 - 06/30/04   24   24   24   24   24   24   24		Enhanced SD/MC Published Charges								
Enhanced SD/MC (Refugees) Costs   07/01/03 - 06/30/04   2,262					l					
Enhanced SD/MC (Refugees) Costs   07/01/03 - 06/30/04   2,262     2		Enhanced SD/MC Negotiated Rates					ļ			
26       Enhanced SD/MC (Refugees) SMA Upper Limits       07/01/03 - 06/30/04       2,573         27       Enhanced SD/MC (Refugees) Published Charges       07/01/03 - 06/30/04       2,573         28       Enhanced SD/MC (Refugees) Negotiated Rates       07/01/03 - 06/30/04         29       Healthy Families Costs       07/01/03 - 09/30/03         30       10/01/03 - 09/30/04       359         30A       Healthy Families SMA Upper Limits       07/01/03 - 09/30/04         31       Healthy Families Published Charges       07/01/03 - 09/30/03         31       Healthy Families Negotiated Rates       07/01/03 - 09/30/03         32A       Healthy Families Negotiated Rates       07/01/03 - 09/30/03	24A	• • • • • • • • • • • • • • • • • • •	10/01/03 - 06/30/04	1			\$15.44.5.5.5.5.5.5.5.5.5.5		<u> </u>	(1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,
27   Enhanced SD/MC (Refugees) Published Charges   07/01/03 - 06/30/04	25		07/01/03 - 06/30/04	2,262						
28       Enhanced SD/MC (Refugees) Negotiated Rates       07/01/03 - 06/30/04       07/01/03 - 09/30/03         29       Healthy Families Costs       07/01/03 - 06/30/04       359       182       104         30       Healthy Families SMA Upper Limits       07/01/03 - 09/30/03       07/01/03 - 09/30/03       10/01/03 - 06/30/04         31       Healthy Families Published Charges       07/01/03 - 09/30/03       10/01/03 - 06/30/04       10/01/03 - 06/30/04         32       Healthy Families Negotiated Rates       07/01/03 - 09/30/03       10/01/03 - 06/30/04       10/01/03 - 06/30/04				2,573						
Healthy Families Costs   07/01/03 - 09/30/03   182   104										
29A   Realthy Families Costs   10/01/03 - 06/30/04   359   182   104	28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04	1				 		
29A   Realthy Families Costs   10/01/03 - 06/30/04   359   182   104	29	Haritta Familia Casta	07/01/03 - 09/30/03	1		F				<u> </u>
30   Healthy Families SMA Upper Limits   07/01/03 - 09/30/03   10/01/03 - 06/30/04   460   248   142		nealiny ramilles Costs		359	<u>.</u>		182	104		
30A   10/01/03 - 06/30/04   460   248   142		Healthy Families SMA Linner Limite								
31A   32A   32A   Healthy Families Negotiated Rates   10/01/03 - 06/30/04     07/01/03 - 09/30/03     10/01/03 - 06/30/04				460			248	142		
10/01/03 - 06/30/04		Healthy Families Published Charges								
32A   Realitry Families Negotiated Rates   10/01/03 - 06/30/04				<del> </del>				L		L
324 10/07/03 - 06/30/04		Healthy Families Negotiated Rates		<b> </b>		<b> </b> -	ļ	<u> </u>	ļ	<u> </u>
33 Non-Medi-Cal Costs 283,034 57.972 285 7.260 182 683	32A		10/01/03 - 06/30/04		***************		\$7.71.71.71.72.72.72.72.72.72.72.72.72.72.72.72.72.			**************
	33	Non-Medi-Cal Costs	<u> </u>	283,034	57,972		285	7,260	182	683

#### DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County Code: 30		MHS	MHS	MHS	MHS	MHS	MHS	MHS
Legal Entity: COUNTY OF ORANGE		Н			K	L	M	N
Legal Entity Number: 00030		Service	Service	Service	Service	Service	Service	Service
Mode: 15 - Outpatient (Program 2)		Function	Function	Function	Function	Function	Function	Function
		31	41	51	61	32	42	52
Allocation Percentage		1.91%	28.25%	0.05%	38.18%	0.77%	7.05%	0.109
2 Total Units		43,265	639,585	1,095	864,575	17,520	159,600	2,205
3 Gross Cost	00000000000000000	106,358	1,572,285	2,692	2,125,376	43,069	392,343	5,42
Cost per Unit		2.46	2.46	2.46	2.46	2.46	2.46	2.46
5 SMA per Unit		2.36	2.36	2.36	4.37	2.36	2.36	2.30
Published Charge per Unit								
Negotiated Rate / Cost per Unit								
3	07/01/03 - 09/30/03	16.442	156,984	495	197.567	6,430	43,560	150
Medi-Cal Units	10/01/03 - 06/30/04	24,169	443,819	553	621,575	10,690	112,440	1,96
	07/01/03 - 09/30/03		1.010.00					
Medicare/Medi-Cal Crossover Units	10/01/03 - 06/30/04	60	310		330		$\overline{}$	
10	07/01/03 - 09/30/03	180	150	-	330		60	
Enhanced SD/MC Units	10/01/03 - 06/30/04	180	140		785		1,260	
10B Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04	60	_ 140		200	120	480	
11	07/01/03 - 09/30/03	- 00		<del></del> -			400	
Healthy Families (SED) Units	10/01/03 - 06/30/04	<del></del>	<del></del>				+	
12 Non-Medi-Cal Units	10/01/03 - 00/30/04	2,174	20 400	47	43,788	220	1,800	
12 Interviewed Chile	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	and the second second	38,182	141777211111111111	<u> </u>	0.000.000.000.000	and the second s	<u>unagan</u> tana
13 Medi-Cal Costs	07/01/03 - 09/30/03	40,419	385,912	1,217	485,677	15,807	107,083	36
13A Medi-Cai Costs	10/01/03 - 06/30/04	59,414	1,091,036	1,360	1,528,012	26,279	276,410	4,83
Medi-Cal SMA Upper Limits	07/01/03 - 09/30/03	38,803	370,482	1,168	863,368	15,175	102,802	35
14A	10/01/03 - 06/30/04	57,039	1,047,413	1,305	2,716,283	25,228	265,358	4,63
15 Madi Cal Bublished Charges	07/01/03 - 09/30/03							
Medi-Cal Published Charges	10/01/03 - 06/30/04							
16 Maris Cal Nanadiated Batter	07/01/03 - 09/30/03							
Medi-Cal Negotiated Rates	10/01/03 - 06/30/04							
<u>ara bigarawana manakana ana kataman ana ana ana ana ana ana ana ana ana</u>	07/04/02 00/20/02		<u> </u>			100000000000	0.000(0.000000)	<u> Paragaige Pa</u>
Medicare/Medi-Cal Crossover Costs	07/01/03 - 09/30/03	<u> </u>	700		- 544			
17A	10/01/03 - 06/30/04	147	762		811			
Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/03 - 09/30/03	- 440	700				<del></del>	
18A	10/01/03 - 06/30/04	142	732		1,442			
Medicare/Medi-Cal Crossover Published Charges	07/01/03 - 09/30/03							
19A	10/01/03 - 06/30/04							
Medicare/Medi-Cal Crossover Negotiated Rates	07/01/03 - 09/30/03	<u> </u>						
20A Medicare Medicar Crossover Negotiated Nates	10/01/03 - 06/30/04		(1000000000000000000000000000000000000		oriona and the			
21	07/01/03 - 09/30/03	442	369		811		147	
Enhanced SD/MC Costs	10/01/03 - 06/30/04	442	344		1,930	147	3,097	14
22	07/01/03 - 09/30/03	425	354		1,442		142	
Enhanced SD/MC SMA Upper Limits	10/01/03 - 06/30/04	425	330		3,430	142	2,974	14
23	07/01/03 - 09/30/03							
Enhanced SD/MC Published Charges	10/01/03 - 06/30/04		_					
24	07/01/03 - 09/30/03							
Enhanced SD/MC Negotiated Rates	10/01/03 - 06/30/04	<del> </del> -						
<u>a dil manakan maniki, manakan bilangan manikan manakan manikan ma</u>	<u> Proportional and the contract of the contract</u>	<u>agriculturatio</u>	<u></u>	<del>1910,000,000</del>	<u></u>	anagene.		. <u></u>
25 Enhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04	147			492	295	1,180	
26 Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/03 - 06/30/04	142			874	283	1,133	
27 Enhanced SD/MC (Refugees) Published Charges	07/01/03 - 06/30/04							
28 Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04	L						
29	07/01/03 - 09/30/03		<u>्रच्याच्याच्या</u>	3323333333E	: <u>र त्राच्याः विष</u> ्णुत् <u>यस्य</u>		original digital	<u> </u>
Healthy Families Costs			<del></del>				<del>                                     </del>	
	10/01/03 - 06/30/04		<del></del>					
Healthy Families SMA Upper Limits	07/01/03 - 09/30/03					<del> </del>	<del></del>	
30A Treatily Farmines SWA Opper Links	10/01/03 - 06/30/04	<del> </del>	<del> </del>	<b></b>				
Healthy Families Published Charges	07/01/03 - 09/30/03	<u> </u>	<u> </u>					
31A	10/01/03 - 06/30/04	<u> </u>						
Healthy Families Negotiated Rates	07/01/03 - 09/30/03				ļ. —.			
32A	10/01/03 - 06/30/04	1	<u> </u>	L	1. (. <del>1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1</del>			* <u>**********</u>

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY		MHS	MHS	MHS	MHS	MHS	MHS	
County Code: 30						MILIS		
Legal Entity: COUNTY OF ORANGE	O Service	P	Q	R	S		U	
Legal Entity Number: 00030			Service	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 15 - Outpatient (Program 2)	Function 33	Function 43	34	44.	35	65	Function	
1 Allocation Percentage	Allocation Percentage				2.41%	0.34%	0.03%	
2 Total Units		0.80% 18,130	7.45% 168,780	0.29% 6,480	54,570	7,740	755	
3 Gross Cost		44,569	414,910	15,930	134,149	19,027	1,856	
4 Cost per Unit		2.46	2.46	2.46	2.46	2.46	2.46	<u> </u>
5 SMA per Unit		2.36	2.36	2.36	2.36	2.36	4.37	
6 Published Charge per Unit					2.50			
7 Negotiated Rate / Cost per Unit								
B Madi Callina	07/01/03 - 09/30/03	4,710	34,860	1,680	10,350		<u>, 12 12 12 12 12 12 12 12 12 12 12 12 12 </u>	
Medi-Cal Units	10/01/03 - 06/30/04	13,080	130,260	4,680	42,840	7,440	755	
<u></u>	07/01/03 - 09/30/03	10,000	130,200	4,000	42,040	7,440		
Medicare/Medi-Cal Crossover Units	10/01/03 - 06/30/04	+				<del></del>		
10	07/01/03 - 09/30/03	60	720		<del></del>			
Enhanced SD/MC Units	10/01/03 - 06/30/04	220	1,980		660	180		
10B Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04		1,000		550	60	<del></del>	
11	07/01/03 - 09/30/03	<del></del>				<del></del>	<del></del>	
Healthy Families (SED) Units	10/01/03 - 06/30/04							
12 Non-Medi-Cal Units	1.1.2.1.2.2.2.0.0.0.04	60	960	120	720	60		
	07/04/00 00/00/00	<u>tajaran kanajaran</u>	garanan garanan gara	17:15:15:15:15:15:15:15:15:15:15:15:15:15:	1.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5	<u> </u>		*.* <u>.*.*.</u> *.* <u>.</u> *.
13 Medi-Cal Costs	07/01/03 - 09/30/03	11,579	85,696	4,130	25,443	18.300	1 950	
13A 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	10/01/03 - 06/30/04	32,155	320,217	11,505	105,313	18,290	1,856	
Medi-Cal SMA Upper Limits	07/01/03 - 09/30/03	11,116	82,270	3,965	24,426	47.550	2 200	
15 Madi Cal Dublished Charge	10/01/03 - 06/30/04	30,869	307,414	11,045	101,102	17,558	3,299	
	07/01/03 - 09/30/03				———			
15A Sept. Col. No. of the d. D. Col. No. of	10/01/03 - 06/30/04 07/01/03 - 09/30/03							
Medi-Cal Negotiated Rates	10/01/03 - 06/30/04	<del></del>						
1466 and Grant Anna (170 and 170 and 1		404 <u>4444</u>		1000000000000	वयवद्यवयक्तात	<u> </u>	andandajana.	<u> </u>
17 Medicare/Medi-Cal Crossover Costs	07/01/03 - 09/30/03							
17A	10/01/03 - 06/30/04							
Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/03 - 09/30/03							
18A	10/01/03 - 06/30/04							
Medicare/Medi-Cal Crossover Published Charges	07/01/03 - 09/30/03							
19A	10/01/03 - 06/30/04							
20 Medicare/Medi-Cal Crossover Negotiated Rates	07/01/03 - 09/30/03	<u> </u>						
20A Tredical Care Grossover (regulates Hates	10/01/03 - 06/30/04	00000000000000	Sand Constituted		वस्तराचनस्य स्थान	:राजनसरमानसराज -		
Enhanced SD/MC Costs	07/01/03 - 09/30/03	147	1,770					
21A Enhanced SD/MC Costs	10/01/03 - 06/30/04	541	4,867		1,622	442		
Enhanced SD/MC SMA Upper Limits	07/01/03 - 09/30/03	142	1,699					
ZZA	10/01/03 - 06/30/04	519	4,673		1,558	425		
Enhanced SD/MC Published Charges	07/01/03 - 09/30/03							
Z3A	10/01/03 - 06/30/04							
Enhanced SD/MC Negotiated Rates	07/01/03 - 09/30/03							
24A	10/01/03 - 06/30/04							
25 Enhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04	arangi aranganana			anang tananan <u>an di</u> nanah	147	<u> </u>	<u>,</u>
26 Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/03 - 06/30/04					142		
27 Enhanced SD/MC (Refugees) Published Charges	07/01/03 - 06/30/04					172		
28 Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04							
<u>entigarante de la constante de</u>	<u> </u>	32233323333	000000000000000000000000000000000000000				<u></u>	<u>चनगरं चनगर</u>
Healthy Families Costs	07/01/03 - 09/30/03							L <u>—</u> —
29A	10/01/03 - 06/30/04							
Healthy Families SMA Upper Limits	07/01/03 - 09/30/03	ļl						
30A	10/01/03 - 06/30/04							
Healthy Families Published Charges	07/01/03 - 09/30/03							
31A	10/01/03 - 06/30/04							
Healthy Families Negotiated Rates	07/01/03 - 09/30/03							L
32A	10/01/03 - 06/30/04					 		
33 Non-Medi-Cal Costs		147	2.360	295	1,770	147		***********

### DEPARTMENT OF MENTAL HEALTH PAGE 1 OF 1

### ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL MH 1966 (08/04)

**DETAIL COST REPORT** 

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY

County Code: 30

CR

	Legal Entity: COUNTY OF ORANGE	A	В		D	E	F	G
Le	Legal Entity Number: 00030		Service	Service	Service	Service	Service	Service
	Mode: 45 - Outreach	Mode Total	Function_	Function	Function	Function	Function	Function
L			20					
1	Allocation Percentage	100.00%	100.00%					İ
2	Total Units		9,174		l	<u> </u>		
3	Gross Cost	183,480	183,480					
4	Cost per Unit		20.00	<u>+0+0+0+0+0+0+0+0+0+0+0+0+0+0+0+0+0+0+0</u>		<u> </u>	10+7+2+2+2+1+1+2+2+2+2+1+1+1+1+1+1+1+1	************************
5	Non-Medi-Cal Units		9,174					
6	Non-Medi-Cal Costs	183,480	183,480	-		<u> </u>	111111111111111111111111111111111111111	

### DEPARTMENT OF MENTAL HEALTH PAGE 1 OF 2

### ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL MH 1966 (08/04)

**DETAIL COST REPORT** 

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY

County Code: 30		MAA	MAA	MAA	MAA	MAA	MAA
Legal Entity: COUNTY OF ORANGE	Α	В	С	D	E	F	·G
Legal Entity Number: 00030		Service	Service	Service	Service	Service	Service
Mode: 55 - Medi-Cal Administrative Activities		Function_	Function	Function_	Function	Function	Function
		01	04	07	11	14	17
1 Allocation Percentage	100.00%	9.66%	2.31%	22.02%	3.54%	25.17%	5.76%
2 Total Units		349,200	129,420	731,820	136,260	840,600	228,480
3 Total Expenditures	2,284,372	220,617	52,815	503,119	80,934	575,049	131,575
4 Cost per Unit		0.63	0.41	0.69	0.59	0.68	0.58
5 Non-Medi-Cal Costs	945,630						

### DEPARTMENT OF MENTAL HEALTH PAGE 2 OF 2

### ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL MH 1966 (08/04)

**DETAIL COST REPORT** 

FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY

	County Code: 30	MAA	MAA	MAA	MAA	MAA		
	Legal Entity: COUNTY OF ORANGE	Н	1	J	K	L	M	N
Le	gal Entity Number: 00030	Service						
	Mode: 55 - Medi-Cal Administrative Activities	Function	Function	Function	Function	Function	Function	Function
		21	24	27	31	35		
1	Allocation Percentage	6.85%	13.72%	0.56%	5.86%	4.54%		
2	Total Units	221,160	377,460	18,420	284,940	146,160		
3	Total Expenditures	156,372	313,429	12,896	133,956	103,610		
4	Cost per Unit	0.71	0.83	0.70	0.47	0.71		
5	Non-Medi-Cal Costs							

**DEPARTMENT OF MENTAL HEALTH** PAGE 1 OF 1

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL MH 1966 (08/04)

**DETAIL COST REPORT** 

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FISCAL YEAR 2003 - 2004

County: ORANGE COUNTY

	OIX	OIC	O.C			
Α	В	С	D	E	F	G
	Service	Service	Service	Service	Service	Service
Mode Total	Function	Function	Function	Function	Function	Function
]	30	40	60			
	A Mode Total	A B Service Mode Total Function	Mode Total Function Function	A B C D Service Service Service Mode Total Function Function Function	A         B         C         D         E           Service         Service         Service         Service           Mode Total         Function         Function         Function	A B C D E F Service Service Service Service Service Mode Total Function Function Function Function

### DETERMINATION OF SD/MC DIRECT SERVICE AND MAA REIMBURSEMENT MH 1968 (08/04)

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

FISCAL YEAR 2003 - 2004

Medican   Medi	County: ORANGE COUNTY County Code: 30				PEIMBLIRS	EMENT TYPE	PC		Costs		i	Costs	
Auto-Col Contents   Auto-Col Contents   Auto-Col Col Col Col Col Col Col Col Col Col			A			F		н _					
Mod-Carl Colors			<u> </u>	_									
Medical Code   Medi			<u> </u>				Inpatient	11-1-05 11		11. 1. 45		11-4-45	
Medicar Colons   1999			S E's 01-09		S F's 21-29	MAA			Mode 10				(CDI. 1 + CDI. J)
A Medical State   1,000   1,00	1 Modi Cal Costs	07/01/03 - 09/30/03	0:1:3				rio <u>apitai</u>	Other	128,366	3,594,226	3,722,592	1,312,351	5,034,943
Medicar C	<u>IA</u>	10/01/03 - 06/30/04							424,223	11,035,070	11,459,293	3,949,552	15,408,845
Medical P. C.   10,000   10,	Medi-Cal SMA								181,042		3,892,017	1,711,954	5,603,971
Medical Processor							_		191,042	3 710 076	3 802 017	5,214,945	3 802 017
Medicar Res   Medicar Gross Res   Medicar Gr	3A Medi-Cal P. C.												
Medican Medican State   1907.00 (1905)	4 Medi-Cal N. R												
Medicar Mode, Call Crossover Coll   07:131   07:290   1   12:250   17:250	4A Med da H. H.	10/01/03 - 06/30/04											
Medican Most Cut Consoure Cost   100,000   1	5 Medi Cal Grass Roimbursement	07/01/03 - 09/30/03							128,366	3,594,226	3,722,592	1,312,351	5,034,943
12   14   14	5A Medi-Gai Gross Reimbarsement	10/01/03 - 06/30/04									11,459,293	3,949,552	15,408,845
MedicameMed.Call Crossover P. C.   100100-100000000000000000000000000000	6 Madicara/Madi Cal Crossover Cost									67,884	67,884		67,884
Medicar Medical Costsone P. C.   1975   19	6A Medicare/Medi-Cai Crossover Cost						_				122,744	1,721	124,465
MedicareMedic Cal Crossorer P. C. (1970) - 090005   17,256   17,	Medicare/Medi-Cal Crossover SMA												
MedicamPuberCod Constorer N.   C001003 - 690004   122.566   122.											67 836	2,310	
Noticemented-Carl Cristories Proceedings   1996	Medicare/Medi-Cal Crossover P. C.	10/01/03 - 06/30/04								122.564			122,564
MacCore/Medic Cal Crissover Gross Rem	9 Madicare/Medi Cal Crossover N. P.												
1906	9A Wedicare Wedi-Car Clossover N, R.	10/01/03 - 06/30/04											
1936   1937	10 Medicare/Medi-Cal Crossover Gross Reim	07/01/03 - 09/30/03					<u></u>			67.884	67.884		67,884
194	10A Medicare/Medi-Cal Crossover Gross Reim.	10/01/03 - 06/30/04										1,721	
194	11 Total SD&IC + Crossover Cross Baim	07/01/03 - 09/30/03					<u> </u>	112127,12111111111111	128 366	3 662 109	3 790 475	1.312.351	5.102.827
Enhanced SDMC (Children) SMA	11A Total SD/MC + Crossover Gross Reim.	10/01/03 - 06/30/04					-	_					
120	12	07/01/03 - 09/30/03								7 358	7 358	3 697	11.046
13	12A Enhanced SD/MC (Children) Cost	10/01/03 - 06/30/04											
Privated SDMC (Children) P. C.   107/16/3   083001   49.572   45	13 Fohanced SD/MC (Children) SMA	07/01/03 - 09/30/03								7,674	7,674	4,203	11,877
144   145	13A											14,617	64,189
15							L				7,674		7,674
150   Entire Cest Stork (Children) Fr. R.   100103 : 093004   1.586	45							<del></del>		49,572	_49,572		49,572
15	15A Enhanced SD/MC (Children) N. R.												
1,000   1,00		07/01/03 - 09/30/03						<u> </u>	<u> </u>	7 359	7 359	3.687	11.046
17   Emanced SDMC (Refugees) SMA   070/103 - 0693004   2,267   2,267   2,267   2,271	16A Enhanced SD/MC (Children) Gross Reim.								<del></del>	47.771	47,771		61,353
18   Enhanced SDMC (Refugees) SIAA   0770173 - 0693004   2,773   2,773   2,773   2,773   2,773   2,773   2,773   2,773   2,773   2,774   2,7							. 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	, 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	<u> paragonale for terrella</u>		Transfer of the sty		
19	18 Enhanced SD/MC (Refugees) SMA	07/01/03 - 06/30/04											2,573
Total Med-Cal Gross Reimbursement	19 Enhanced SD/MC (Refugees) P. C.	07/01/03 - 06/30/04						_					
21A   Escudes Refugees    1001/03 -093004   3.964.855   15,594.663   2.262	20 Enhanced SD/MC (Refugees) N. R.	07/01/03 - 06/30/04											
21A   Esculdes Refugees)   100103 - 963004   3,864,855   15,594,685   2,262	21 Total Medi-Cal Gross Reimbursement	07/01/03 - 09/30/03							128,366	3.669.467	3,797,834	1,316,039	5,113,872
Part   Part	21A (Excludes Refugees)												15,594,663
23A	22 Enhanced SD/MC (Refugees) Gross Reim.	07/01/03 - 06/30/04										2,262	2,262
Age	23 Healthy Families Cost									3,611	3,611		3,611
1001/03 - 06/30/04   34.03	23A   1   23   1   23   23   23   23   23	10/01/03 - 06/30/04								32,930	32,930	359	33,289
Healthy Families P. C.   0701/03 - 09/30/03	Healthy Families SMA	07/01/03 - 09/30/03								3,779	3,779		3,779
100103 - 093004   34,403   3									<u> </u>			460	34,863
Feather   Families	25A Healthy Families P. C.												34,403
Feather   Families	26 Healthy Families N. R.	07/01/03 - 09/30/03											
Less: Patient and Other Payor Revenue	• 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1	10/01/03 - 06/30/04	400000000000000000000000000000000000000					l					
Less: Patient and Other Payor Revenue	27 Healthy Families Gross Reim			<u>utijaldali</u>						3,611			3,611
SD/MC + Crossover Revenue	27A 11551111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10/01/03 - 06/30/04								32,930	32,930	359	33,289
28A SOFTIC Children Revenue 10(01/03 - 06/30/04 1 1,745 1 224 47,745 2 1 224 47,745 2 2 1 47,521 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	00	107/04/02 00/00/00											
Enhanced SD/MC (Children) Revenue	SD/MC + Crossover Revenue					<del> </del>	<del> </del>	1	<del>                                     </del>				
Enhanced SD/MC (Refugees) Revenue	29 Enhanced SD/MC (Children) Revenue	10/01/03 + 00/30/04					<del> </del> _	<del>                                     </del>	<del></del>	41,521	41,321	224	41,145
Healthy Families Revenue	30 Enhanced SD/MC (Refugees) Revenue							<del></del>					
33 Medi-Cal Eligibility Factor (Average) 34 Revenue - MAA 35 Net Due - SD/MC for Direct Services   07/01/03 - 09/30/03   776,551   382,217   179,974   1,338,742   128,366   3,627,839   3,756,206   1,315,777   5,071,982   35A   36A   Net Due - Enhanced SD/MC (Refugees)   10/01/03 - 09/30/03   11,158,064   11,582,287   3,984,631   15,546,918   36A   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/04   10/01/03 - 09/30/03   10/01/03 - 09/30/04   10/01/03 - 09/30/04   10/01/03 - 09/30/04   10/01/03 - 09/30/04   10/01/03 - 09/30/04   10/01/03 - 09/30/04   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10	31 Healthy Families Revenue								L				
33 Medi-Cal Eligibility Factor (Average) 34 Revenue - MAA 35 Net Due - SD/MC for Direct Services   07/01/03 - 09/30/03   776,551   382,217   179,974   1,338,742   128,366   3,627,839   3,756,206   1,315,777   5,071,982   35A   36A   Net Due - Enhanced SD/MC (Refugees)   10/01/03 - 09/30/03   11,158,064   11,582,287   3,984,631   15,546,918   36A   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/04   10/01/03 - 09/30/03   10/01/03 - 09/30/04   10/01/03 - 09/30/04   10/01/03 - 09/30/04   10/01/03 - 09/30/04   10/01/03 - 09/30/04   10/01/03 - 09/30/04   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10/01/03 - 09/30/03   10		<u>a la la la caractara de la fafar</u> a de Caractara.	776.551	1,025,124	482.697	2,284.372							
35	33 Medi-Cal Eligibility Factor (Average)		THE REPORT OF					nici di didale					
35A   Technic Control Contro	34   Kevenue - MAA		Julius III										
35A   Technic Control Contro	35 Net Due - SDMC for Direct Services	07/01/03 - 09/30/03	776.551	382.217	179.974	1,338.742			128.366	3,627.839	3,756,206	<u>1</u> ,315,777	5,071,982
37	[35A]_	10/01/03 - 06/30/04	4:::::::::::::::::::::::::::::::::::::						424,223	11,158,064	11,582,287	3,964,631	15,546,918
Amount Negotiated Rates Exceed Costs  38 SD/MC (Includes Children)   07/01/03 - 09/30/03	36   Net Due - Enhanced SD/MC (Refugees)	107/04/00 00/05/00	<u> Pietriciani</u>									2,262	2,262
Amount Negotiated Rates Exceed Costs  38 SD/MC (Includes Children)   07/01/03 - 09/30/03	Net Due - Healthy Families .		100000000000000000000000000000000000000				<del> </del>	<del> </del>	<del> </del>			250	
38   SD/MC (Includes Children)	glagagagagagana habara na habara katagara na habara	10/01/03 - 00/30/04							2012/2014/2014/2014	32,930	32,930	359	33,209
38A 55/MC (Refugees) 10/01/03 - 06/30/04 11/03 - 06/30/03 11/03 - 06/30/	20	107/04/02 00/00/00											headamede
39 Enhanced SD/MC (Refugees)  40 Healthy Families   07/01/03 - 09/30/03	SD/MC (Includes Children)		100000000000000000000000000000000000000				<del> </del>	<del> </del>	<del></del>	<del>                                     </del>			<del>                                     </del>
40 Healthy Families 07/01/03 - 09/30/03	39 Enhanced SD/MC (Refugees)	110/01/00 - 00/00/04					<del></del>	<del> </del>		<del>                                     </del>			
40A 10/01/03 - 06/30/04 1222222222222222222222222222222222222	40 Healthy Families		<u> Handidi</u>			garaninini	<del></del>						
	40A Healthy Farmines	10/01/03 - 06/30/04						L					

DETAIL COST REPORT

### DETAIL COST REPORT

#### SD/MC PRELIMINARY DESK SETTLEMENT MH 1979 (08/04)

FISCAL YEAR 2003 - 2004

DEPARTMENT OF MENTAL HEALTH

County: ORANGE COUNTY County Code: 30

Legal Entity: COUNTY OF ORANGE		Α	В	C	D	E	F I	G	Н	1	
Legal Entity Number: 00030		Total MAA	Total Inpatient	Total Outpatient	Total	50.00% FFP	54.35% FFP	52.95% FFP	Variable %	75.00% FFP	Total FFP
SD/MC Administrative Reimbursement (County	Only)										
1 County SD/MC Direct Service Gross Reimburse	ment			20,710,797	20,710,797						
2 Contract Providers Medi-Cal Direct Service Gros	ss Reimbursement		7,470,436	28,303,451	35,773,887						
3 Total Medi-Cal Direct Service Gross Reimburser	ment				56,484,684						
4 Medi-Cal Administrative Reimbursement Limit					8,472,703						
5 Medi-Cal Administration					8,755,260						
6 Medi-Cal Administrative Reimbursement					8,472,703	4,236,351					4,236,351
Healthy Families Administrative Reimbursement	(County Only)										
7 County Healthy Families Direct Service Gross R				36,900	36,900						
7A Contract Providers Healthy Families Direct Servi				13,308	13,308						
7B Total Healthy Families Direct Service Gross Reig					50,208						
8 Healthy Families Administrative Reimbursement					5.021						
9 Healthy Families Administration					15,963						
10 Healthy Families Administrative Reimbursement					5,021				3,264		3,264
SD/MC Net Reimbursement for MAA	SD/MC Net Reimbursement for MAA										
11 Medi-Cal Admin, Activities Syc Functions 01 - 09					776.551	388,276					388.276
2 Medi-Cal Admin. Activities Svc Functions 11 - 19, 31 - 39		382,217			382,217	191,109					191,109
13 Medi-Cal Admin. Activities Svc Functions 21 - 29	9 (County Only)	179,974			179,974					134,980	134,980
14 Utilization Review-Skilled Prof. Med. Personnel (	(County Only)				agita waaaagga bawa					<u>namanangka</u> na	nemegétitimunti
	(County Only)				<del></del>					1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	<u>वरावयप्रस्थाययय्वयस्य</u>				<u>iejelenningsfestetetete</u>	<u></u>					<u> </u>
16 SD/MC Net Reimbursement for Direct Services	07/01/03 - 09/30/03			5,060,937	5,060,937		2,750,619				2,750,619
16A	10/01/03 - 06/30/04			15,485,565	15,485,565			8,199,607			8,199,607
Enhanced SD/MC Net Reimb. (Children)	07/01/03 - 09/30/03			11,046	11,046				7,180		7,180
11/A 1	10/01/03 - 06/30/04			61,353	61,353				39,879		39,879
18 Enhanced SD/MC Net Reimb. (Refugees)	· · · · · · · · · · · · · · · · · · ·			2,262	2,262				2,262		2,262
19 Total SD/MC Reimbursement Before Excess FF	P										15,950,262
20 Amount Negotiated Rates Exceed Costs - SD/M	C & Enh. SD/MC										
21 Total SD/MC Reimbursement (FFP)	21 Total SD/MC Reimbursement (FFP)										15,950,262
22 Contract Limitation Adjustment											
23 Adjusted Total SD/MC Reimbursement (FFP)											15,950,262
			<u> विकासिने वेकेन्त्री वेके</u>								ज्यस <u>्ययंत्रयंत्रयः</u>
24 Healthy Families Net Reimbursement	07/01/03 - 09/30/03			3,611	3,611				2,347		2,347
	10/01/03 - 06/30/04		eteraTeterreterererere	33,289	33,289				21,638		21,638
25 Total Healthy Families Reimbursement Before E											27,249
26 Amount Negotiated Rates Exceed Costs - Health 27 Total Healthy Families Reimbursement	ny ramilles										27.040
27 Total Healthy Families Reimbursement											27,249